


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**

**Apr 27, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # N00000005936 1. Entity Name B. G. A. INDUSTRIES COMMUNITY DEVELOPMENT CORPORATION	
--	---

Principal Place of Business 9117 LEM TURNER RD JACKSONVILLE, FL 32208	Mailing Address 9117 LEM TURNER RD JACKSONVILLE, FL 32208
---	---

DO NOT WRITE IN THIS SPACE



04252006 No Chg-NP CR2E037 (11/05)

4. FEI Number 59-3669195	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  ALLEN, BRUCE V REV 10832 NAPLES CT. S. JACKSONVILLE, FL 32218
--

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	---

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ALLEN, BRUCE V REV 10832 NAPLES CT. S. JACKSONVILLE, FL 32218
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ALLEN, RENITA 10832 NAPLES COURT SOUTH JACKSONVILLE, FL 32218
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PARL SMITH, LUVETRO 1432 RAVEN DRIVE SOUTH JACKSONVILLE, FL 32218
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000539928  
05/09/06-80118-011 61.25

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Bruce V. Allen 4/25/06  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #