



# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 25, 2007 8:00 am**  
**Secretary of State**

04-25-2007 90172 033 \*\*\*\*61.25

<b>DOCUMENT # N00000005936</b>					
<b>1. Entity Name</b> B. G. A. INDUSTRIES COMMUNITY DEVELOPMENT CORPORATION					
<b>Principal Place of Business</b> 9117 LEM TURNER RD JACKSONVILLE, FL 32208			<b>Mailing Address</b> 9117 LEM TURNER RD JACKSONVILLE, FL 32208		
<b>2. Principal Place of Business - No P.O. Box #</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
<b>City &amp; State</b>		<b>City &amp; State</b>			
<b>Zip</b>	<b>Country</b>	<b>Zip</b>	<b>Country</b>		
<b>6. Name and Address of Current Registered Agent</b>  ALLEN, BRUCE V REV 10832 NAPLES CT. S. JACKSONVILLE, FL 32218				<b>7. Name and Address of New Registered Agent</b>  Name Allen, Bruce V Street Address (P.O. Box Number is Not Acceptable) 4019 Anderson Woods Drive  City Jacksonville, FL Zip Code 32218	
<b>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.</b>  SIGNATURE: <i>Bruce V. Allen</i> <span style="float: right;">x 4/24/07</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2007</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be</b> <b>Added to Fees</b>	
<b>Make check payable to</b> <b>Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>					
<b>TITLE</b> P <b>NAME</b> ALLEN, BRUCE V REV <b>STREET ADDRESS</b> 10832 NAPLES CT. S. <b>CITY-ST-ZIP</b> JACKSONVILLE, FL 32218	<input checked="" type="checkbox"/> Delete				
<b>TITLE</b> VP <b>NAME</b> ALLEN, RENITA <b>STREET ADDRESS</b> 10832 NAPLES COURT SOUTH <b>CITY-ST-ZIP</b> JACKSONVILLE, FL 32218	<input checked="" type="checkbox"/> Delete				
<b>TITLE</b> PARL <b>NAME</b> SMITH, LUVETRO <b>STREET ADDRESS</b> 1432 RAVEN DRIVE SOUTH <b>CITY-ST-ZIP</b> JACKSONVILLE, FL 32218	<input type="checkbox"/> Delete				
<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete				
<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete				
<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete				
<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>					
<b>TITLE</b> P <b>NAME</b> Allen, Bruce V <b>STREET ADDRESS</b> 4019 Anderson Woods Drive <b>CITY-ST-ZIP</b> Jacksonville, Florida 32218	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition				
<b>TITLE</b> VP <b>NAME</b> Allen, Renita <b>STREET ADDRESS</b> 4019 Anderson Woods Drive <b>CITY-ST-ZIP</b> Jacksonville, Florida 32218	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition				
<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
<b>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.</b>					
<b>SIGNATURE:</b> <i>Bruce V. Allen</i> <span style="float: right;">x 4/24/07 x 924-0000</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					