

# 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

07 JAN -5 AM 8:24

DOCUMENT # N05000010013

1. Entity Name  
B&M CONSULTING AND MANAGING, INC.



Principal Place of Business  
101-A EDWARDS RD.  
STARKE, FL 32091

Mailing Address  
P.O. BOX 177  
LAWTEY, FL 32058

REINSTATEMENT 06-07

07/10/06 90101 001 \$61.25



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01032007 REIN-NP CR2E099 (11/05)

City & State

City & State

4. FEL Number

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CRAWFORD, BERNADETTE  
1012 25TH ST. E.  
PALMETTO, FL 34221

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FILE NOW!!! FEE IS \$297.50

Make check payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
O  
MARKS, SHIRLEY  
1313 CHARLES CT.  
STARKE, FL 32091 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
Latara Stanley  
105 Manning St  
Brunswick, GA 31520 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
O  
LEE, LINDA  
1606 ALBANY ST.  
BRUNSWICK, GA 31520 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
President  
600083418066  
01/05/07--01050--001 \*\*61.25 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
O  
TYSON, SABRINA  
1116 W. 45 TER  
FT. LAUDERDALE, FL 33316 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
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STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

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☐ Change ☐ Addition

TITLE  
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CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

2072

To Whom It May Concern:

I sent in our annual report and check for \$61.25 in 2006 and I thought it was file I just find out it was rejected. I did not receive any notice of rejection please waive the reinstatement fee. I am enclosing a check for \$61.25 for 2007 annual report fee.

Linda Lee