

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 09, 2008 8:00 am
Secretary of State

09-09-2008 90025 001 ***122.50

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

66016437



2. Principal Place of Business - No P.O. Box #
1170 NE 219 St
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Lawtey FL
Zip Country
32058 Bradford

City & State
Zip Country

07212008 Chg-NP CR2E037 (12/06)

4. FEI Number
33-1114924
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LEE, LINDA
1606 ALBANY STREET
BRUNSWICK, FL 31520

7. Name and Address of New Registered Agent

Name Rellen H. Clark
Street Address P.O. Box Number (Is Not Applicable)
1170 NE 219 St
City Lawtey FL Zip Code 32058

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 Rellen H. Clark 9-4-08
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 September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	P	Delete
NAME	LATARA, STANLEY	
STREET ADDRESS	105 MANNING STREET	
CITY-ST-ZIP	BRUNSWICK, GA 31520	
TITLE	O	Delete
NAME	LEE, LINDA	
STREET ADDRESS	1606 ALBANY ST.	
CITY-ST-ZIP	BRUNSWICK, GA 31520	
TITLE	O	Delete
NAME	TYSON, SABRINA	
STREET ADDRESS	1116 W. 45 TER	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33316	
TITLE		Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	Nich: Clark	Change	Addition
NAME	P.O. BOX 177		
STREET ADDRESS	Lawtey FL 32058		
CITY-ST-ZIP			
TITLE	Volanda Clark	Change	Addition
NAME	P.O. BOX 177		
STREET ADDRESS	Lawtey, FL 32058		
CITY-ST-ZIP			
TITLE	Melissa Clark	Change	Addition
NAME	P.O. Box 167		
STREET ADDRESS	Lawtey, FL 32058		
CITY-ST-ZIP			
TITLE		Change	Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		Change	Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		Change	Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

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: Rellen H. Clark Rellen H. Clark 9-4-08
Signature and Typed or Printed Name of Signing Officer or Director Date Daytime Phone #

904-782-3058