2007 FOR PROFIT CORPORATION

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZP 1

FILED ANNUAL REPORT Feb 19, 2007 08:00 A **DOCUMENT # P00000002251** Secretary of State B AND D ENTERPRISES OF CLEARWATER, INC. Principal Place of Business Mailing Address 112 W. GRAPEFRUIT CIR. 112 W. GRAPEFRUIT CIR. CLEARWATER, FL 33759 CLEARWATER, FL 33759 02152007 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3620082 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent GRONBECK, DONN W DO NOT WRITE 112 W. GRAPEFRUIT CIR. CLEARWATER, FL 33759 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 end title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be **FILE NOW!!! FEE IS \$150.00** After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITI F NAME **BLEVINS, BRENDA A** U00000640414 02/28/07-80065-010 150.00 STREET ADDRESS 112 W. GRAPEFRUIT CIR. CITY-ST-ZP CLEARWATER, FL 33759 TM F NAME GRONBECK, DONN W STREET ADDRESS 112 W. GRAPEFRUIT CIR. CITY-ST-7IP CLEARWATER, FL 33759 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 607, 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:) u.	Calal	DONN	U. GRONBECK	2/15/07	727-797-5116
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Dete	Daysme Phone #