

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000007856

Entity Name: BCB INDUSTRIES, INC.

FILED
Jan 23, 2009
Secretary of State

Current Principal Place of Business:

7232 OVERLAND RD.
ORLANDO, FL 32810

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 910
APOPKA, FL 327040910

New Mailing Address:

FEI Number: 59-3625554

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BATHKE, BENJAMIN M
109 HULL AVE
OAKLAND, FL 34760 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CARDOZA, RONALD E
Address: P.O. BOX 910
City-St-Zip: APOPKA, FL 327040910

Title: D () Delete
Name: BUCHHOLZ, RICHARD D
Address: P.O. BOX 910
City-St-Zip: APOPKA, FL 327040910

Title: D () Delete
Name: BATHKE, BENJAMIN M
Address: P.O. BOX 910
City-St-Zip: APOPKA, FL 327040910

Title: S,T () Delete
Name: CARDOZA, RONALD E
Address: 15549 ARABIAN WAY
City-St-Zip: MONTVERDE, FL 34756

Title: V () Delete
Name: BUCHHOLZ, RICHARD D
Address: 331 HAVER LAKE CIRCLE
City-St-Zip: APOPKA, FL 32712

Title: P () Delete
Name: BATHKE, BENJAMIN M
Address: 109 HULL AVE
City-St-Zip: OAKLAND, FL 34760

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: BUCHHOLZ, RICHARD D
Address: P.O. BOX 910
City-St-Zip: APOPKA, FL 32704

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BENJAMIN M. BATHKE

P

01/23/2009

Electronic Signature of Signing Officer or Director

Date