2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000010352

City-St-Zip:

HOBE SOUND, FL 33455

FILED Mar 22, 2005 Secretary of State

Entity Name: BCA HOLDING CORP.					
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
	RATH DRIVE , FL 33462				
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
	RATH DRIVE , FL 33462				
FEI Number	: 65-0999844	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
ALEXANDER, LARRY B 505 S FLAGLER DR, SUITE 1100 WEST PALM BEACH, FL 33401 US			GUSMANO, CHARLES 790 HILLBRATH DRIVE LANTANA, FL 33462	790 HILLBRATH DRIVE	
The above in the State	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE: CHARLES GUSMANO				03/22/2005	
	Electro	nic Signature of Registered Age	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution (X).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (GUSMANO, CH 790 HILLBRAT LANTANA, FL	H DRIVE	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	D (LOMANGINO, 790 HILLBRAT LANTANA, FL	H DRIVE	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address:	D (LOMANGINO, . 520 SOUTH BE		Title: (Name: Address:) Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

SIGNATURE: CHARLES GUSMANO D 03/22/2005