2005 FOR PROFIT CORPORATION ANNUAL REPORT

May 02, 2005 8:00 am Secretary of State **DOCUMENT # P00000031523** 05-02-2005 90452 006 ***150.00 1. Entity Name BFC HOLDING CO. Principal Place of Business Mailing Address 250 PARK AVENUE SOUTH P.O. BOX 3010 SUITE 630 WINTER PARK, FL 32790-3010 WINTER PARK, FL 32789 04262005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number 59-1225442 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BATTAGLIA, W.P. DO NOT WRITE 250 PARK AVENUE SOUTH SUITE630 IN THIS SPACE WINTER PARK, FL 32789

old with the lea	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating	

9. Election Campaign Financing Trust Fund Contribution.

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

\$5.00 May Be Added to Fees

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. **VPSD** TITLE

BATTAGLIA, R.E.

the obligations of registered agent.

SIGNATURE_

NAME

NAME STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS P.O. BOX 3010 CITY-ST-ZIP WINTER PARK, FL 32790 PTD TITLE BATTAGLIA, W.P. NAME STREET ADDRESS P.O. BOX 3010 CITY-ST-7IP WINTER PARK, FL 32790 TITLE **BUTTS, ANSLEY B** NAME P.O. BOX 3010 STREET ADORESS CITY-ST-ZIP WINTER PARK, FL 32790 TITLE NAME STREET ADDRESS City-St-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

DO NOT WRITE IN THIS SPACE

FILED

Applied For

Not Applicable

12. I hereby certify that the information supplied with this filing does not qualify 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 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:	UPBayy		President 4/27/05	407-622-1700
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFIC	ER OR DIRECTOR	Date	Daytime Phone