



2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2005 8:00 am
Secretary of State

03-14-2005 90077 041 ***150.00

DOCUMENT # P01000025242					
1. Entity Name B.I.G. HOME DEAL, INC.					
Principal Place of Business 15120 THIRD DRIVE EAST BRADENTON, FL 34202			Mailing Address 15120 THIRD DRIVE EAST BRADENTON, FL 34202		
2. Principal Place of Business 3413 Kingswood Dr Suite, Apt. #, etc.		3. Mailing Address PO Box 17205 Suite, Apt. #, etc.			
City & State SARASOTA FL 34232		City & State SARASOTA FL		4. FEI Number 65-1083432	
Zip 34232		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MCCLELLAN, RODNEY 15120 THIRD DRIVE EAST BRADENTON, FL 34202			7. Name and Address of New Registered Agent Name: <u>Nicholas D. McClellan</u> Street Address (P.O. Box Number is Not Acceptable): <u>3413 Kingswood Dr</u> City: <u>SARASOTA</u> <u>FL</u> Zip Code: <u>34232</u>		
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: <u>Nicholas D. McClellan</u> <u>Nicholas D. McClellan</u> <u>3-6-05</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reconstituting) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCCLELLAN, NICHOLAS D 2413 KINGS WOOD DR SARASOTA, FL 34232 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P. <u>Nicholas D McClellan</u> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <u>3413 Kingswood Dr</u> <u>SARASOTA, FL 34232</u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MCCLELLAN, RODNEY E <input checked="" type="checkbox"/> Delete 18120 3RD DR E BRADENTON, FL 34212		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <u>Nicholas D. McClellan</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<u>3-6-05</u> <u>941-650-6203</u> <small>Date Daytime Phone #</small>		
<u>Nicholas D McClellan</u>					