

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2004 8:00 am
Secretary of State

02-25-2004 90048 027 ***150.00

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1. Entity Name

B & D PROPERTY ASSOCIATES, INC.



Principal Place of Business

358 NW BENTLEY CIRCLE
PORT ST LUCIE, FL 34986

Mailing Address

358 NW BENTLEY CIRCLE
PORT ST LUCIE, FL 34986



02042004

No Chg-P

CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FBI Number

04-3592815

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

BAKER, ROBERT A
358 NW BENTLEY CIRCLE
PORT ST LUCIE, FL 34986

**DO NOT WRITE
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 and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D President
NAME	BAKER, ROBERT A
STREET ADDRESS	358 NW BENTLEY CIRCLE
CITY-ST-ZIP	PORT ST LUCIE, FL 34986
TITLE	D Vice President
NAME	DUVELSDORF, JOHN
STREET ADDRESS	107 NW BENTLEY CIRCLE
CITY-ST-ZIP	PORT ST LUCIE, FL 34986
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: *Robert A Baker* **ROBERT A BAKER**

FEB 4, 2004 772-878-1121

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #