## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000031279

Entity Name: BDC CANVAS, INC

City-St-Zip:

JACKSONVILLE, FL 32210

FILED Mar 30, 2005 Secretary of State

Entity Nar	me: BDC CA	NVAS, INC.			
Current P	rincipal Place	e of Business:	New Principal Place of	New Principal Place of Business:	
	BRIDGE ROA VILLE, FL 32:				
Current M	lailing Addre	ss:	New Mailing Address:	New Mailing Address:	
	BRIDGE ROA VILLE, FL 32:				
FEI Number:	: 02-0576919	FEI Number Applied For()	FEI Number Not Applicable()	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of I	Name and Address of New Registered Agent:	
	RAID R BRIDGE ROA VILLE, FL 32:		SPELL, R. CRAIG 4417 CAMBRIDGE ROA JACKSONVILLE, FL 32:	SPELL, R. CRAIG 4417 CAMBRIDGE ROAD JACKSONVILLE, FL 32210 US	
	named entity of Florida.	submits this statement for the	ourpose of changing its registered o	office or registered agent, or both,	
SIGNATUR	RE: R. CRAIC	G SPELL		03/30/2005	
	Electro	nic Signature of Registered Ag	ent	Date	
Election Car	npaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP ( SPELL, R. CR. 8644 O'STEEN JACKSONVILL	STREET	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DST ( SPELL, DENIS 8644 O'STEEN JACKSONVILL	STREET	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address:	DV ( WATKINS, BAF 8644 O'STEEN		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: DENISE SPELL DST 03/30/2005