2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000023685

Entity Name: B & G ENTERPRISES OF COLLIER, INC.

FILED Apr 07, 2008 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:		
	NGWOOD AVE), CT 06825	:				
Current Mailing Address:			New Mailir	New Mailing Address:		
	NGWOOD AVE), CT 06825					
FEI Number:		FEI Number Applied For ()	FEI Number Not Appli	cable (X) Certificate	of Status Desired ()	
Name and	Address of Cu	ırrent Registered Agent:	Name and	Address of New Regis	tered Agent:	
WEBSTER, RONALD S ROYAL PALM MALL 985 N COLLIER BLVD MARCO ISLAND, FL 34145 US 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.						
SIGNATURE:						
	Electronic	Signature of Registered Agen	t	Da	ate	
Election Can	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () E CARAPEZZI, ROI 340 COLLINGWO FAIRFIELD, CT (DOD AVE	Title: Name: Address: City-St-Zip:	()Change()	Addition	
Title: Name: Address: City-St-Zip:	VT () E CARAPEZZI, WIL 1208 EDDINGTO MARCO ISLAND,	N PLACE, E 103	Title: Name: Address: City-St-Zip:	VT (X) Change () CARAPEZZI, WILLIAM R 1208 EDDINGTON PLACE, MARCO ISLAND, FL 34145	E 103	
Title: Name: Address: City-St-Zip:	V () [DUFFY, FREDIRI 7 ELMS RD MANAHAWKIN, N		Title: Name: Address: City-St-Zip:	()Change()	Addition	
Title: Name: Address: City-St-Zip:	S () E CARAPEZZI, NEV 340 COLLINGWO FAIRFIELD, CT (DOD AVE	Title: Name: Address: City-St-Zip:	()Change()	Addition	
Title: Name: Address: City-St-Zip:	VT () E CARAPEZZI, WIL 8 HARBOUR VIEV STRATFORD, CT	W PLACE	Title: Name: Address: City-St-Zip:	VT (X) Change () CARAPEZZI, WILLIAM R 8 HARBOUR VIEW PLACE STRATFORD, CT 06615	Addition	
Title: Name: Address: City-St-Zip:	() [Delete	Title: Name: Address: City-St-Zip:	VP () Change (X) CARAPEZZI, HELEN C 1208 EDINGTON PLACE MARCO ISLAND, FL 34145		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

SIGNATURE: CARAPEZZI WILLIAM VT 04/07/2008