

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000023685

FILED
Mar 31, 2009
Secretary of State

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

Current Principal Place of Business:

340 COLLINGWOOD AVE
FAIRFIELD, CT 06825

New Principal Place of Business:

Current Mailing Address:

340 COLLINGWOOD AVE
FAIRFIELD, CT 06825

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEBSTER, RONALD S
ROYAL PALM MALL
985 N COLLIER BLVD
MARCO ISLAND, FL 34145 US

Name and Address of New Registered Agent:

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 Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CARAPEZZI, RONALD F
Address: 340 COLLINGWOOD AVE
City-St-Zip: FAIRFIELD, CT 06825

Title: VT () Delete
Name: CARAPEZZI, WILLIAM R
Address: 1208 EDDINGTON PLACE, E 103
City-St-Zip: MARCO ISLAND, FL 34145

Title: V () Delete
Name: DUFFY, FREDIRICK
Address: 7 ELMS RD
City-St-Zip: MANAHAWKIN, NJ 08050

Title: S () Delete
Name: CARAPEZZI, NEWELL
Address: 340 COLLINGWOOD AVE
City-St-Zip: FAIRFIELD, CT 06825

Title: VT () Delete
Name: CARAPEZZI, WILLIAM R
Address: 8 HARBOUR VIEW PLACE
City-St-Zip: STRATFORD, CT 06615

Title: VP () Delete
Name: CARAPEZZI, HELEN C
Address: 1208 EDDINGTON PLACE
City-St-Zip: MARCO ISLAND, FL 34145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: WILLIAM R. CARAPEZZI

VT

03/31/2009

Electronic Signature of Signing Officer or Director

Date