


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2007 08:00 A
Secretary of State

DOCUMENT # P03000025583	
1. Entity Name BCI PROPERTIES, INC.	

Principal Place of Business 1460 WILLIAM STREET LEESBURG, FL 34748	Mailing Address 1460 WILLIAM STREET LEESBURG, FL 34748
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DO NOT WRITE IN THIS SPACE



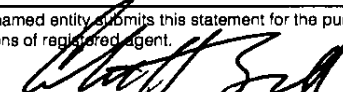
02022007 No Chg-P CR2E034 (11/05)

4. FEI Number 56-2321964	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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8. Name and Address of Current Registered Agent YARISH, BENJAMIN 1460 WILLIAM STREET LEESBURG, FL 34748
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DO NOT WRITE IN THIS SPACE

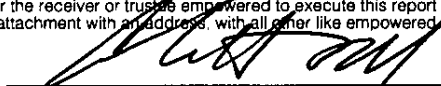
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE 	Corbitt S. Todd	3/17/07
<small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>		

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P YARISH, BENJAMIN 4312 EMMAUS RD. FRUITLAND PARK, FL 347315917
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V TODD, CORBITT S 35429 OLD LAKE UNITY RD FRUITLAND PARK, FL 34731
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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U000000670317
03/27/07-80108-004-150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 	Corbitt S. Todd	3/16/07 346-9566
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>		