## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000030103

Entity Name: BAR & DEMAR CO.

FILED Apr 12, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1860 N. PINE ISLAND ROAD 1860 PINE ISLAND ROAD 105

PLANTATION, FL 33322 PLANTATION, FL 33322

Current Mailing Address: New Mailing Address:

12693 N.W. 9TH STREET
CORAL SPRINGS, FL 33071

8562 SHALLOWBROOK COVE
BOYNTON BEACH, FL 33437

FEI Number: 11-3682216 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DEMARCO, NANCY

5816 NW 120TH TERRACE

CORAL SPRINGS, FL 33076 US

BARNES, BENSON B

8562 SHALLOWBROOK COVE

BOYNTON BEACH, FL 33437 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: BENSON B. BARNES 04/12/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEOP ( ) Delete Title: CEOP (X) Change ( ) Addition

 Name:
 BARNES, BENSON B II
 Name:
 BARNES, BENSON B II

 Address:
 1860 N. PINE ISLAND ROAD #105
 Address:
 8562 SHALLOWBROOK COVE

 City-St-Zip:
 PLANTATION, FL 33322
 City-St-Zip:
 BOYNTON BEACH, FL 33437

Title: VD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 DEMARCO, NANCY
 Name:

 Address:
 1860 N. PINE ISLAND ROAD #105
 Address:

 City-St-Zip:
 PLANTATION, FL 33322
 City-St-Zip:

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 BARNES, BENSON B II
 Name:

 Address:
 1860 N. PINE ISLAND ROAD #105
 Address:

 City-St-Zip:
 PLANTATION, FL 33322
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: BENSON B. BARNES CEOP 04/12/2007