

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000050607

FILED
Apr 29, 2004
Secretary of State

Entity Name: BGP LIMITED INC.

Current Principal Place of Business:

20 S BROAD ST
BROOKSBILLE, FL 34601

New Principal Place of Business:

Current Mailing Address:

20 S BROAD ST
BROOKSBILLE, FL 34601

New Mailing Address:

FEI Number: 73-1665739

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLORIDA & OFFSHORE BUSINESS FORMATION, INC
20 S BROAD ST
BROOKSBILLE, FL 34601

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: D () Delete
Name: PANACEK, LUANNE
Address: 10307 CLIFF CIR
City-St-Zip: TAMPA, FL 33612

Title: D () Delete
Name: BOUWS, ROGER
Address: 314 W FRANCES AVE
City-St-Zip: TAMPA, FL 33602

Title: D () Delete
Name: BOUWS, SUSAN
Address: 314 W FRANCES AVE
City-St-Zip: TAMPA, FL 33602

Title: D () Delete
Name: GAGNON, JEFF
Address: 1709 E KIRBY ST
City-St-Zip: TAMPA, FL 33604

Title: D () Delete
Name: GAGNON, JACOB
Address: 8004 N BLVD
City-St-Zip: TAMPA, FL 33604

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:

Title: () Change () Addition
Name:
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 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.

SIGNATURE: LUANNE PANACEK

D

04/29/2004

Electronic Signature of Signing Officer or Director

Date