2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000050607

Entity Name: BGP LIMITED INC

Address:

City-St-Zip:

8004 N BLVD

TAMPA, FL 33604

FILED May 11, 2005 Secretary of State

Entity Nar	me: BGP LIMI	TED INC.			
Current Principal Place of Business:				New Principal Place of Business:	
20 S BROAD ST BROOKSBILLE, FL 34601				314 WEST FRANCES AVE TAMPA, FL 33602	
Current Mailing Address:				New Mailing Address:	
20 S BROAD ST BROOKSBILLE, FL 34601				314 W. FRANCE AVE TAMPA, FL 33602	
FEI Number:	: 73-1665739	FEI Number Applied For ()	FEI Nur	nber Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:	
FLORIDA & OFFSHORE BUSINESS FORMATION, INC 20 S BROAD ST BROOKSBILLE, FL 34601 US				BOUWS, ROGER A PRES 314 W. FRANCE AVE TAMPA, FL 33602 US	
	named entity se of Florida.	submits this statement for the po	urpose o	f changing its registere	d office or registered agent, or both,
SIGNATURE: ROGER A. BOUWS					05/11/2005
	Electron	ic Signature of Registered Age	nt		Date
Election Car	mpaign Financing	8(2)(b), F.S., the corporation did not in Trust Fund Contribution ().	receive t		ES TO OFFICERS AND DIRECTORS.
OFFICER	S AND DIREC	iuks:		ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	D (X) PANACEK, LUA 10307 CLIFF C TAMPA, FL 336	R		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () BOUWS, ROGE 314 W FRANCE TAMPA, FL 336	S AVE		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () BOUWS, SUSA 314 W FRANCE TAMPA, FL 336	S AVE		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D (X) GAGNON, JEFF 1709 E KIRBY S TAMPA, FL 336	ST		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	D (X) GAGNON, JACO	Delete BB		Title: Name:	() Change () Addition

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.

Address:

City-St-Zip:

SIGNATURE: ROGER A. BOUWS PRES 05/11/2005