

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2004 8:00 am
Secretary of State

01-29-2004 90032 032 ***150.00

DOCUMENT # P03000052224

1. Entity Name
BFF CONTRACTING INC.



Principal Place of Business
**1279 PRICE CIRCLE NW
PORT CHARLOTTE, FL 33948**

Mailing Address
**1279 PRICE CIRCLE NW
PORT CHARLOTTE, FL 33948**



2. Principal Place of Business
1435 East Venice Avenue

3. Mailing Address
P.O. Box 850

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 256

01242004

Chg-P

CR2E034 (10/03)

City & State
Venice, Florida

City & State
Osprey, Florida

4. FEI Number

92-0194145

Applied For

Not Applicable

Zip
34292-3074

Country

Zip

34229-0850

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KEERAN, JOSEPH M SR
1279 PRICE CIRCLE NW
PORT CHARLOTTE, FL 33948**

Name
Allen E. Langdon, Ph.D.

Street Address (P.O. Box Number is Not Acceptable)

125 First Avenue

City
Nokomis

FL

Zip Code
34275-4242

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

Allen E. Langdon

January 24, 2004

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
CAHOO, LEE C ☐ Delete
1279 PRICE CIRCLE NW
PORT CHARLOTTE, FL 33948

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D, P
Cahoo, Lee C. ☒ Change ☐ Addition
1279 Price Circle NW
Port Charlotte, FL 33948

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
EV
KEERAN, JOSEPH M SR ☒ Delete
1279 PRICE CIRCLE NW
PORT CHARLOTTE, FL 33948

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D, S, T
Cahoo, Danielle L. ☐ Change ☒ Addition
1279 Price Circle NW
Port Charlotte, FL 33948

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
CAHOO, LEE C ☒ Delete
1279 PRICE CIRCLE NW
PORT CHARLOTTE, FL 33948

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
KEERAN, JOSEPH M SR ☒ Delete
1279 PRICE CIRCLE NW
PORT CHARLOTTE, FL 33948

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 24, 2004

Date

(941) 391-0873

Daytime Phone #