


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 06, 2005 8:00 am**  
**Secretary of State**

04-06-2005 90092 011 \*\*\*150.00

DOCUMENT # P03000063315 1. Entity Name <b>BDM BUILDERS, INC.</b>	
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Principal Place of Business 11601 66TH STREET NORTH LARGO, FL 33773	Mailing Address 11601 66TH STREET NORTH LARGO, FL 33773
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**DO NOT WRITE IN THIS SPACE**



02172005 No Chg-P CR2E034 (10/03)

4. FEI Number 51-0470253	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

COHRS, DENIS A  
 2575 ULMERTON ROAD SUITE 210  
 CLEARWATER, FL 33762

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	TAYLOR, DAVID
STREET ADDRESS	11601 66TH STREET NORTH
CITY - ST - ZIP	LARGO, FL 33743
TITLE	<del>B</del>
NAME	<del>LARSEN, BENJAMIN W</del>
STREET ADDRESS	<del>5525 43RD AVENUE NORTH</del>
CITY - ST - ZIP	<del>ST PETERSBURG, FL 33709</del>
TITLE	D
NAME	SEITZ, MARK A
STREET ADDRESS	5283 37TH AVENUE NORTH
CITY - ST - ZIP	ST PETERSBURG, FL 33710
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE IN THIS SPACE**

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:  4/4/05  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #