


2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 04, 2006 8:00 am
Secretary of State

08-04-2006 90018 044 ***558.75

DOCUMENT # P03000069565		
1. Entity Name BAY TO BAY CONTRACTING, INC.		
Principal Place of Business 6703 28TH AVENUE EAST BRADENTON FL 34208		Mailing Address 6703 28TH AVENUE EAST BRADENTON FL 34208
2. Principal Place of Business 6703 28th BRADENTON AVE. E.	3. Mailing Address 6703 28th Ave. E.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State BRADENTON, FL	City & State BRADENTON FL	
Zip 34208	Country USA	Zip 34208
Country USA		



2nd MOORE CR2E034 (4/06)

4. FEI Number 51-0468251		Applied For <input type="checkbox"/>
		Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent VENTRIGLIA, MARK A 6703 28TH AVENUE EAST BRADENTON FL 34208		
7. Name and Address of New Registered Agent Name NONE Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		

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 \$550.00 DUE BY September 6, 2006 Make Check Payable to Florida Department of State	S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. <input type="checkbox"/>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	OP VENTRIGLIA, MARK 6703 28TH AVE E BRADENTON FL 34208 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	No changes <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	No ADDS OR CHANGES <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Mark A. Ventriglia **MARK A. VENTRIGLIA** 8/2/06 941-737-3527
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #