

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000094789

Entity Name: BD RECREATION, INC.

FILED  
Apr 25, 2005  
Secretary of State

## Current Principal Place of Business:

55 ST. DAVID'S WAY  
WELLINGTON, FL 33414

## New Principal Place of Business:

1600 NW FEDERAL HIGHWAY  
STUART, FL 34994

## Current Mailing Address:

55 ST. DAVID'S WAY  
WELLINGTON, FL 33414

## New Mailing Address:

1600 NW FEDERAL HIGHWAY  
STUART, FL 34994

FEI Number: 56-2403905

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KINGSMILL, JACK W  
55 ST. DAVID'S WAY  
WELLINGTON, FL 33414 US

## Name and Address of New Registered Agent:

HOUGH, BERTICE K  
1600 NW FEDERAL HIGHWAY  
STUART, FL 34994 US

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: BERTICE K. HOUGH

04/25/2005

Electronic Signature of Registered Agent

Date

## Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: HOUGH, BERTICE K  
Address: P.O. BOX 98  
City-St-Zip: PALM CITY, FL 34990

Title: D/P ( ) Delete  
Name: KINGSMILL, DAVID W  
Address: 2960 SEMINOLE RD.  
City-St-Zip: PALM SPRINGS, FL 33406

Title: VP ( ) Delete  
Name: KINGSMILL, JACK W  
Address: 55 ST. DAVID'S WAY  
City-St-Zip: WELLINGTON, FL 33414

Title: S/T ( ) Delete  
Name: KINGSMILL, MARYANN  
Address: 55 ST. DAVID'S WAY  
City-St-Zip: WELLINGTON, FL 33414

## 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:

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 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: BERTICE K. HOUGH

D

04/25/2005

Electronic Signature of Signing Officer or Director

Date