

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 02, 2005 8:00 am**  
**Secretary of State**

05-02-2005 90977 048 \*\*\*150.00

DOCUMENT # P03000103687

1. Entity Name  
BUILDING TIME, INC.



Principal Place of Business  
2066 14TH AVENUE SUITE 100  
VERO BEACH, FL 32960

Mailing Address  
2066 14TH AVENUE SUITE 100  
VERO BEACH, FL 32960

2. Principal Place of Business  
674 DOT CIRCLE  
Suite, Apt. #, etc.

3. Mailing Address  
P.O. Box 78-0412  
Suite, Apt. #, etc.



04262005 Chg-P CR2E034 (10/03)

City & State  
SEBASTIAN, FL  
Zip  
32958  
Country  
INDIAN RIVER

City & State  
SEBASTIAN, FL  
Zip  
32978  
Country  
INDIAN RIVER

4. FEI Number  
75-3130438  
Applied For  
Not Applicable

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

## 6. Name and Address of Current Registered Agent

WILLIAM N. KIRK, ESQUIRE  
979 BEACHLAND BLVD.  
VERO BEACH, FL 32963

## 7. Name and Address of New Registered Agent

Name  
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 \$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 ☐ Delete  
NAME HARRIS, JIM J  
STREET ADDRESS 2066 14TH AVENUE SUITE 100  
CITY-ST-ZIP VERO BEACH, FL 32960

TITLE D ☐ Delete  
NAME HARRIS, REBECCA D  
STREET ADDRESS 2066 14TH AVENUE SUITE 100  
CITY-ST-ZIP VERO BEACH, FL 32960

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 674 DOT CIRCLE  
CITY-ST-ZIP SEBASTIAN FL 32968

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 674 DOT CIRCLE  
CITY-ST-ZIP SEBASTIAN FL 32958

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

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

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

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

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 persons empowered.

SIGNATURE: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/27/05 772-231-1100