

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 16, 2007 08:00 AM
Secretary of State**

DOCUMENT # P03000137483

1. Entity Name
BELL & BELL CONSTRUCTION, INC.



Principal Place of Business
**310 HOWARD ST
PUNTA GORDA, FL 33950**

Mailing Address
**310 HOWARD ST
PUNTA GORDA, FL 33950**

DO NOT WRITE IN THIS SPACE



01082007 No Chg-P CR2E034 (11/05)

4. FEI Number
20-0368214

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**BELL, JEFFERY C
310 HOWARD ST
PUNTA GORDA, FL 33950**

**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

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, 2007 Fee will be \$550.00**

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

U00000586E28
01/16/07-80060-018 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP BELL, JEFFERY C 310 HOWARD ST PUNTA GORDA, FL 33950
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV BELL, RACHEL A 310 HOWARD ST PUNTA GORDA, FL 33950
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IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/9/07 941-575-2355

Date

Daytime Phone #