## FILED May 05, 2006 8:00 am , Secretary of State

## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

UNIF	DKIN BOSINE	35 REPORT	(OBL	<u>()</u>	05-05-2006 90187 050	***158.75	
DOCUMENT # 1. Entity Name	* P03000	139141					
BKA CONSTRUCTION	J COPP				_		
BNACONSTRUCTION	Y CONF						
DO N	OT WRITE	IN THIS S	3PA	CE			
2. Principal Place of Business		3. Mailing Address			5001	9001	
1147 ROLAND ST		Cuita And H and					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State		City & State			4. FEI Number	Applied For	
SPRING HILL, FL		·		13-4274045	Not Applicable		
Zip 34609	Country	Zip	Co	ountry	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
					ne and Address of Current Re	gistered Agent	
				Name	me REY NEIDECKER		
	RITE	Street		Idress (P.O. Box Number is Not Acceptable)			
IN THIS SPACE				1147 ROLANI	O ST		
				City	F	Zip Code	
9 The character				SPRING HILL			
		accept the obligations			stered office or registered agent	, or both, in the	
		actopt and congenies.		out of agreem			
SIGNATURE	ire, typed or printed name o	f registered agent and title if	applicable	e. (NOTE: Regis	tered Agent signature required when reins	stating) DATE	
January 1	- May 1 Fee is \$150.						
After M Amen			9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees				
Make Check Payable 10.		ND DIRECTORS	11.		<del></del>		
TITLE	PRESIDENT			TLE			
NAME	JEFFREY NEIDECKER 1147 ROLAND ST		14.534.533	AME FREET ADDRES	en e		
STREET ADDRESS	SPRING HILL, FL 34609			TY-ST-ZIP	9		
TITLE	VICE PRESIDENT		TI	TLE			
NAME STREET ADDRESS	MELISSA NEIDECKER 1147 ROLAND ST		100000000000000000000000000000000000000	AME TREET ADDRES	e		
STREET ADDRESS CITY-ST-ZIP	SPRING HILL, FL 3	34609		TY-ST-ZIP	9		
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CITY-ST-ZIP			_L c	ITY-ST-ZIP		lo Statutos I forther	
12. I hereby certify that	the information supplied	f with this filing does not	qualify for	or the exemption true and accurate	stated in Section 119.07(3)(i), Florice and that my signature shall have the	ia Statutes, i further le same legal effect	
as if made under oa	th: that I am an officer of	or director of the corporat	tion or th	e receiver or trus	tee empowered to execute this repo	rt as required by	
Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.							
	1 1						
SIGNATURE: M.	Nerdaller	VICE PRESI	DENT		2/7/2006	352-686-9194	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #							