

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000144751

**FILED
May 03, 2005
Secretary of State**

Entity Name: BONDS TILE COMPANY INCORPORATED

Current Principal Place of Business:

PO BOX 134
SOPCHOPPY, FL 32358

New Principal Place of Business:

Current Mailing Address:

PO BOX 134
SOPCHOPPY, FL 32358

New Mailing Address:

FEI Number: 20-0434149 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

RICHARD, BONDS
36 RIVER TERRACE
SOPCHOPPY, FL 32358 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BONDS, RICHARD
Address: PO BOX 134
City-St-Zip: SOPCHOPPY, FL 32358

Title: OFF () Delete
Name: TAFF, JEFFERY
Address: 6 MCKENZIE ST.
City-St-Zip: SOPCHOPPY, FL 32358

Title: OFF () Delete
Name: HERRING, TIMOTHY
Address: 31 CATHERINE ST.
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: OFF () Delete
Name: EASTERWOOD, WILLIAM
Address: 80 MILL HOLLOW SR.
City-St-Zip: CRAWFORDVILLE, FL 32327

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 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: RICHARD BONDS

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05/03/2005

Electronic Signature of Signing Officer or Director

_____ Date