

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000157395

Entity Name: BNL SERVICES, INC.

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

2395 PLACID DR.  
FT. WALTON BCH, FL 32547

## **New Principal Place of Business:**

611 LLOYD ST.  
FT. WALTON BCH, FL 32547

## **Current Mailing Address:**

711 POWELL DR.  
FT. WALTON BCH, FL 32547

## **New Mailing Address:**

PO BOX 823  
FT. WALTON BCH, FL 32549

FEI Number: 65-1216900

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

LEFEBVRE, BERNIE N  
2395 PLACID DR.  
FT. WALTON BCH, FL 32547 US

## **Name and Address of New Registered Agent:**

LEFEBVRE, BERNIE N  
611 LLOYD ST  
FT. WALTON BCH, FL 32547 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:

Electronic Signature of Registered Agent

04/29/2011

Date

## **OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: LEFEBVRE, BERNIE  
Address: 611 LLOYD ST.  
City-St-Zip: FT. WALTON BCH, FL 32547

I hereby 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 all other like empowered.

SIGNATURE: BERNIE LEFEBVRE

PSTD

04/29/2011

Electronic Signature of Signing Officer or Director

Date