

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000045180

Entity Name: BMD OF FLORIDA, INC.

FILED
Mar 11, 2005
Secretary of State

Current Principal Place of Business:

3409 HEID ROAD
SEBRING, FL 33875

New Principal Place of Business:

11850 TWITTY ROAD
SEBRING, FL 33876

Current Mailing Address:

3409 HEID ROAD
SEBRING, FL 33875

New Mailing Address:

11850 TWITTY ROAD
SEBRING, FL 33876

FEI Number: 20-0849282

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DALKE, BARRY M
9320 MCROY ROAD
SEBRING, FL 33875 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DALKE, BARRY M
Address: 3409 HEID ROAD
City-St-Zip: SEBRING, FL 33875

Title: VP () Delete
Name: DALKE, LINDA R
Address: 3409 HEID ROAD
City-St-Zip: SEBRING, FL 33875

Title: S () Delete
Name: DALKE, LINDA R
Address: 3409 HEID ROAD
City-St-Zip: SEBRING, FL 33875

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DALKE, BARRY M
Address: 11850 TWITTY ROAD
City-St-Zip: SEBRING, FL 33876

Title: VP (X) Change () Addition
Name: DALKE, LINDA R
Address: 11850 TWITTY ROAD
City-St-Zip: SEBRING, FL 33876

Title: S (X) Change () Addition
Name: DALKE, LINDA R
Address: 11850 TWITTY ROAD
City-St-Zip: SEBRING, FL 33876

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: LINDA R DALKE

VP

03/11/2005

Electronic Signature of Signing Officer or Director

_____ Date