

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000056619

Entity Name: BJC FRAMING, INC.

FILED  
Apr 07, 2005  
Secretary of State

## Current Principal Place of Business:

17916 N.W. 190TH AVENUE  
HIGH SPRINGS, FL 32643

## New Principal Place of Business:

## Current Mailing Address:

17916 N.W. 190TH AVENUE  
HIGH SPRINGS, FL 32643

## New Mailing Address:

FEI Number: 20-0949824

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COPELAND, WILLIAM S  
17916 N.W. 190TH AVENUE  
HIGH SPRINGS, FL 32643 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: COPELAND, WILLIAM S  
Address: 17916 N.W. 190TH AVE  
City-St-Zip: HIGH SPRINGS, FL 32643

Title: VP ( ) Delete  
Name: LASSITER, JARRED M  
Address: 18302 N.W. 190TH AVENUE  
City-St-Zip: HIGH SPRINGS, FL 32643

Title: VP ( ) Delete  
Name: MACDONALD, CHRISTOPHER D  
Address: 16027 S.W. 15TH AVENUE  
City-St-Zip: NEWBERRY, FL 32669

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: ALLIGOOD, BRUCE  
Address: 27209 NCR 1491  
City-St-Zip: ALACHUA, FL 32615 US

Title: VP ( ) Change (X) Addition  
Name: LISTON, MATTHEW J  
Address: RT. 3 BOX 285  
City-St-Zip: LAKE BUTLER, FL 32054 US

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: WILLIAM S. COPELAND

P

04/07/2005

Electronic Signature of Signing Officer or Director

Date