

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 13, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000064948					
1. Entity Name B & T REALTY GROUP INC.					
Principal Place of Business 1020 10TH AVENUE WEST SUITE 15 PALMETTO FL 34221			Mailing Address 1020 10TH AVENUE WEST SUITE 15 PALMETTO FL 34221		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 56-2454336	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	



1st MOORE CR2E034 (10/05)

4. FEI Number **56-2454336** Applied For Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent DELL, THOMAS W 5944 7TH AVE WEST BRADENTON FL 34209				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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8. 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. I am familiar with, and accept the obligations of registered agent.

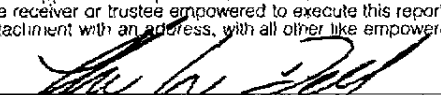
SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing **\$5.00 May Be Added to Fees**
Trust Fund Contribution. ☐

10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD DELL, THOMAS W 1020 10TH AVENUE WEST PALMETTO FL 34221	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	UN00000431924 02/23/06-80048-004 150.00	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V STEPHENS, JOHN A 1020 10TH AVENUE WEST PALMETTO FL 34221	☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **2/9/06 941-780-6631**