

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000104141

Entity Name: BGS CONSOLIDATED, INC

FILED
Apr 23, 2005
Secretary of State

Current Principal Place of Business:

2105 THIERVY DRIVE
JACKSONVILLE, FL 32210 US

New Principal Place of Business:

6003-10 ROOSEVELT BLVD
JACKSONVILLE, FL 32244 US

Current Mailing Address:

2105 THIERVY DRIVE
JACKSONVILLE, FL 32210 US

New Mailing Address:

FEI Number: 20-1352039 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALLINS, WILLIAM III
2105 THIERVY DRIVE
JACKSONVILLEFL, FL 32210 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: GRAHAM, ALONZO
Address: 2069 W 18TH STREET
City-St-Zip: JACKSONVILLE, FL 32209 US

Title: VP () Delete
Name: BELLAMY, MENDELL
Address: 1801 KERNAN BLVD
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: SEC () Delete
Name: SALLINS, WILLIAM III
Address: 2105 THIERVY DRIIVE
City-St-Zip: JACKSONVILLE, FL 32210 US

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:

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: ALONZO GRAHAM

P

04/23/2005

Electronic Signature of Signing Officer or Director

Date