

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000104141

Entity Name: BGS CONSOLIDATED, INC

FILED  
May 01, 2006  
Secretary of State

## Current Principal Place of Business:

6003-10 ROOSEVELT BLVD  
JACKSONVILLE, FL 32244 US

## New Principal Place of Business:

5000-13 NORWOOD AVE  
JACKSONVILLE, FL 32208 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  
JACKSONVILLE, FL 32210 US

## Name and Address of New Registered Agent:

SALLINS, WILLIAM III  
2105 THIERVY DRIVE  
JACKSONVILLE, FL 32210 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

05/01/2006

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
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 DRIVE  
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 Chapter 119, 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

05/01/2006

Electronic Signature of Signing Officer or Director

Date