## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000122238

Entity Name: B & M PROPERTIES INTERNATIONAL, INC.

FILED Jul 02, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 106 MYRTLE LANE CLEWISTON, FL 33440 **Current Mailing Address: New Mailing Address:** 106 MYRTLE LANE CLEWISTON, FL 33440 FEI Number: 20-1546429 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCGAHEE, MELANIE A 417 SUGARLAND HWY US CLEWISTON, FL 33440 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 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition BAIN, DONALD R Name: Name: 106 MYRTLE LANE Address: Address: City-St-Zip: CLEWISTON, FL 33440 City-St-Zip: Title: Title: () Delete () Change () Addition Name: BAIN, ANITA R Name: 106 MYRTLE LANE Address: Address: CLEWISTON, FL 33440 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition MANNING, SCOTT G Name: Name: 106 MYRTLE LANE Address: Address: City-St-Zip: CLEWISTON, FL 33440 City-St-Zip: Title: () Delete Title: () Change () Addition MANNING, JENNIFER A Name: Name: Address: 106 MYRTLE LANE Address: City-St-Zip: CLEWISTON, FL 33440 City-St-Zip: Title: Title: () Delete () Change () Addition BAIN, MARVIN L Name: Name: 106 MYRTLE LANE Address: Address: City-St-Zip: CLEWISTON, FL 33440 City-St-Zip: Title: () Delete Title: () Change () Addition BAIN, ELLEN J Name: Name: 106 MYRTLE LANE Address: Address: City-St-Zip: City-St-Zip: CLEWISTON, FL 33440

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: JENNIFER MANNING D 07/02/2005