

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000133203

FILED  
Jan 25, 2006  
Secretary of State

Entity Name: BELL CONSTRUCTION & DEVELOPMENT, INC.

## Current Principal Place of Business:

906 S.W. SAINT LUCIE WEST BLVD.  
SUITE 194  
PORT SAINT LUCIE, FL 34986

## New Principal Place of Business:

## Current Mailing Address:

906 S.W. SAINT LUCIE WEST BLVD.  
SUITE 194  
PORT SAINT LUCIE, FL 34986

## New Mailing Address:

FEI Number: 42-1648020

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEVINE, MICHAEL R  
906 S.W. SAINT LUCIE WEST BLVD.  
SUITE 194  
PORT SAINT LUCIE, FL 34986 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: LEVINE, MICHAEL R  
Address: 906 S.W. SAINT LUCIE WEST BLVD. #194  
City-St-Zip: PORT SAINT LUCIE, FL 34986 US

Title: SEC (X) Delete  
Name: LEVINE, MICHAEL R  
Address: 906 S.W. SAINT LUCIE WEST BLVD. #194  
City-St-Zip: PORT SAINT LUCIE, FL 34986 US

Title: VP (X) Delete  
Name: MICHELLE, LEVINE J  
Address: 6102 NW GAUSE AVENUE  
City-St-Zip: PORT SAINT LUCIE, FL 34986

## 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: MICHAEL LEVINE

P

01/25/2006

Electronic Signature of Signing Officer or Director

Date