

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000142521

Entity Name: BARDOL GROUP, INC.

FILED
Apr 24, 2009
Secretary of State

Current Principal Place of Business:

3443 BLUEBERRY DRIVE
LAKELAND, FL 33811

New Principal Place of Business:

Current Mailing Address:

3443 BLUEBERRY DRIVE
LAKELAND, FL 33811

New Mailing Address:

FEI Number: 20-1768026

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCDONALD, STEPHEN J
315 SOUTHEAST 7TH STREET
SUITE 303
FORT LAUDERDALE, FL 33301 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: D () Delete
Name: MCDONALD, STEPHEN J
Address: 315 SOUTHEAST 7TH STREET, SUITE 303
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: D () Delete
Name: GOOD, JANET E
Address: 3331 S.W. SUNSET TRACE CIRCLE
City-St-Zip: PALM CITY, FL 34990

Title: D () Delete
Name: KAZMIERSKI, HEATHER S
Address: 3443 BLUEBERRY DRIVE
City-St-Zip: LAKELAND, FL 33811

Title: D () Delete
Name: MCDONALD, PAUL M
Address: 621 SW 60 AVE
City-St-Zip: PLANTATION, FL 33317

Title: D () Delete
Name: MCDONALD, MARK S
Address: 3318 SCENIC WAY
City-St-Zip: LAKELAND, FL 33809

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:

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 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: HEATHER S. KAZMIERSKI

D

04/24/2009

Electronic Signature of Signing Officer or Director

_____ Date