2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000064277

Entity Name: BKSG INC.

FILED May 09, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 105 POINT OF WOODS TRAIL PALATKA, FL 32177 **Current Mailing Address: New Mailing Address:** 105 POINT OF WOODS TRAIL PALATKA, FL 32177 FEI Number: 20-2775937 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: PURCELL, BRAD 105 POINT OF WOODS TRAIL PALATKA, FL 32177 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 (X) Change () Addition PURCELL, KATHRYN PURCELL, KATHRYN Name: Name: 105 POINT OD WOODS TRAIL 105 POINT OF WOODS TRAIL Address: Address: City-St-Zip: PALATKA, FL 32177 US City-St-Zip: PALATKA, FL 32177 US Title: Title: () Delete (X) Change () Addition Name: PURCELL, DAVID Name: ANITA, KNIGHT 114 CRESTWOOD AVE. PO BOX 505 Address: Address: WEST TISBURY, MA 02575 PALATKA, FL 32177 US City-St-Zip: City-St-Zip: Title: D/S () Delete Title: D/P (X) Change () Addition PURCELL, JONI BRAD, PURCELL Name: Name: 114 CRESTWOOD AVE. 105 POINT OF WOODS TRAIL Address: Address: City-St-Zip: PALATKA, FL 32177 City-St-Zip: PALATKA, FL 32177 Title: (X) Delete Title: () Change () Addition KNIGHT, ANITA Name: Name: Address: PO BOX 505 Address: City-St-Zip: WEST TISBURY, MA 02575 City-St-Zip: Title: P/D (X) Delete Title: () Change () Addition Name: PURCELL, BRAD Name: 105 POINT OF WOODS TRAIL Address: Address: City-St-Zip: PALATKA, FL 32177 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: BRAD PURCELL D/P 05/09/2007