2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000012134

Entity Name: BJD EXCAVATING, INC.

P.O. BOX 813

WAUCHULA, FL 33873

Address: City-St-Zip: FILED Apr 29, 2009 Secretary of State

Littly Na	ille. BJD EXC	AVATING, INC.			
Current P	rincipal Place	e of Business:	New Principal Place	New Principal Place of Business:	
	COWART RO LA, FL 33873	DAD			
Current Mailing Address:			New Mailing Address:		
P.O. BOX WAUCHU	813 LA, FL 33873				
FEI Number	: 20-4227217	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
120 SOUT AVON PAI The above		ENUE US	purpose of changing its registered	d office or registered agent, or both,	
	e of Florida.				
SIGNATUI		nic Signature of Registered Ag	uent	 Date	
Election Car		g Trust Fund Contribution ().	,	2 3.13	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PRES (MCLEOD, MAF P.O. BOX 813 WAUCHULA, F		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (MCLEOD, BD P.O. BOX 813 WAUCHULA, F) Delete L 33873	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	,) Delete RTON DARWIN JR	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: MARY JANE MCLEOD P 04/29/2009