

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000031941

Entity Name: BMKN, INC

FILED
Mar 15, 2009
Secretary of State

Current Principal Place of Business:

471 HOWARD JONES RD.
DEFUNIAK SPRINGS, FL 32433

New Principal Place of Business:

Current Mailing Address:

471 HOWARD JONES RD.
DEFUNIAK SPRINGS, FL 32433

New Mailing Address:

FEI Number: 02-0802465

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWBORN, JAMES M
471 HOWARD JONES RD.
DEFUNIAK SPRINGS, FL 32433 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: NEWBORN, JAMES M
Address: 471 HOWARD JONES RD.
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: VP () Delete
Name: HASKINS, ERIC E
Address: P.O. BOX 1688
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

Title: S () Delete
Name: MCKINLEY, CHESTER G
Address: P.O. BOX 1688
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

Title: () Delete
Name:
Address:
City-St-Zip:

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: T () Change (X) Addition
Name: LOYED, MICHEAL J
Address: 14 MILLERS WAY
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

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: JAMES M NEWBORN

P

03/15/2009

Electronic Signature of Signing Officer or Director

Date