

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000114142

Entity Name: B RICHARDS HOLDINGS INC.

FILED
Oct 22, 2009
Secretary of State

Current Principal Place of Business:

4601 E. HWY. 100 SUITE 49
BUNNELL, FL 34110

New Principal Place of Business:

Current Mailing Address:

4 CHADWICK CT.
PALM COAST, FL 32137

New Mailing Address:

FEI Number: 26-1246597

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICHARDS, BRUCE J
4 CHADWICK CT.
PALM COAST, FL 32137 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RICHARDS, BRUCE J
Address: 4 CHADWICK CT.
City-St-Zip: PALM COAST, FL 32137

Title: VP () Delete
Name: RICHARDS, PAIGE M
Address: 4 CHADWICK CT.
City-St-Zip: PALM COAST, FL 32137

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: SECT () Change (X) Addition
Name: LOUIS, MANGIACOPRA
Address: 577214 ARBOR CLUB WAY
City-St-Zip: BOCA RATON, FL 33433

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: BRUCE RICHARDS

P

10/22/2009

Electronic Signature of Signing Officer or Director

Date