


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90989 020 ***150.00

DOCUMENT # P93000026900

1. Entity Name
BAUC-WARDS BROKERAGE, INC.



Principal Place of Business 1909 MANATEE AVE, EAST BRADENTON, FL 34208 US	Mailing Address 1909 MANATEE AVE, EAST BRADENTON, FL 34208 US
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DO NOT WRITE IN THIS SPACE

14010000



04262005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0399447	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WARD, RAYMOND L JR.
 5542 34TH CT. EAST
 BRADENTON, FL 34203

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	BAUCHER, STACY
STREET ADDRESS	109 BROWN ST
CITY-ST-ZIP	BRADENTON, FL 34208
TITLE	D
NAME	WARD, RAYMOND L JR.
STREET ADDRESS	5542 34TH CT. EAST
CITY-ST-ZIP	BRADENTON, FL 34203
TITLE	D
NAME	WARD, SANDRA I
STREET ADDRESS	5542 34TH CT. EAST
CITY-ST-ZIP	BRADENTON, FL 34203
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Date _____ Daytime Phone # _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR