

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 12, 2008 8:00 am
Secretary of State

02-12-2008 90022 017 ***150.00

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1. Entity Name

BDT CONSULTING, INC.



Principal Place of Business

908 JENKS AVE
PANAMA CITY FL 32401
US

Mailing Address

P.O. BOX 708
PANAMA CITY FL 32402
US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3199182

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

1st MOORE CR2E034 (10/07)



6. Name and Address of Current Registered Agent

RICHARDS-SULLIVAN, THERESA
620 E. CR
PANAMA CITY FL 32401

7. Name and Address of New Registered Agent

Name *Theresa Richards-Sullivan*

Street Address (P.O. Box Number is Not Acceptable)

620 E. 1st St

Panama City, FL 32401

City

Panama City

FL

Zip Code

32401

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

Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when substituting)

DATE

Theresa Richards-Sullivan

02/08

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE	P	☐ Delete
NAME	RICHARDS-SULLIVAN, THERESA	
STREET ADDRESS	525 E 4TH ST	
CITY-ST-ZIP	PANAMA CITY FL	
TITLE	V	☐ Delete
NAME	GORDON, HELEN	
STREET ADDRESS	525 E 4TH ST	
CITY-ST-ZIP	PANAMA CITY FL 32401	
TITLE	S	☐ Delete
NAME	SADA, ANN	
STREET ADDRESS	525 E 4TH ST	
CITY-ST-ZIP	PANAMA CITY FL 32401	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☒ Change ☐ Addition
NAME	<i>Theresa Richards-Sullivan</i>	
STREET ADDRESS	<i>620 E. 1st St</i>	
CITY-ST-ZIP	<i>Panama City, FL 32401</i>	
TITLE		☒ Change ☐ Addition
NAME	<i>Helen Gordon</i>	
STREET ADDRESS	<i>620 E. 1st St</i>	
CITY-ST-ZIP	<i>Panama City, FL 32401</i>	
TITLE		☐ Change ☐ Addition
NAME	<i>Ann Sada</i>	
STREET ADDRESS	<i>620 E. 1st St</i>	
CITY-ST-ZIP	<i>Panama City, FL 32401</i>	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Theresa Richards-Sullivan

850-872-1660

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number