


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 26, 2005 08:00 AM
Secretary of State

DOCUMENT # P93000067615 1. Entity Name BWF ENTERPRISES, INC.	
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Principal Place of Business 1401 S MILITARY TRAIL SUITE E WEST PALM BEACH FL 33415 US	Mailing Address P.O. BOX 1380 SUITE B LAKEWORTH FL 33460 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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2nd MOORE CR2E034 (5/05)

City & State	City & State		
Zip	Country	Zip	Country

4. FEI Number 65-0438616	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent POLK, LLOYD K 664 SPRINGDALE CIRCLE PALM SPRINGS FL 33460	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City
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FL	Zip Code
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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 \$550.00
DUE BY September 7, 2005
Make Check Payable to Florida Department of State

S 607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00.

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

10. OFFICERS AND DIRECTORS	
TITLE	D <input type="checkbox"/> Delete NAME: VONDRAK, RICHARD STREET ADDRESS: 2580 S OCEAN BLVD., 1B6 CITY- ST- ZIP: PALM BEACH FL 33480
TITLE	D <input type="checkbox"/> Delete NAME: LOFSTROM, BERT STREET ADDRESS: 9025 SOMERSET BAY LANE CITY- ST- ZIP: VERO BEACH FL 32963
TITLE	D <input type="checkbox"/> Delete NAME: BURNETT, NEWTON C STREET ADDRESS: 11811 AVE. OF THE PGA, 5-18 CITY- ST- ZIP: PALM BCH. GARDENS FL
TITLE	VP <input type="checkbox"/> Delete NAME: BRESNAHAN, CAROL STREET ADDRESS: 236 BIRCH ST CITY- ST- ZIP: BOYNTON BEACH FL 33426
TITLE	DST <input type="checkbox"/> Delete NAME: HAMPTON, KATHRYN STREET ADDRESS: 1016 S J ST. CITY- ST- ZIP: LAKE WORTH FL 33460
TITLE	DP <input type="checkbox"/> Delete NAME: BRESNAHAN, GLENN STREET ADDRESS: 125 SPRUCE ST. CITY- ST- ZIP: BOYNTON BEACH FL 33426

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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U00000377225
08/26/05-80005-010 558.75

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: *Kathryn Hampton* KATHRYN HAMPTON 8/22/2005