


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT # P94000025769 1. Entity Name BBR CORP.	
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Principal Place of Business MASSACHUSETTS LONGBOAT KEY, FL 34228	Mailing Address 5523 GULF OF MEXICO DR. LONGBOAT KEY, FL 34228
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02272004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0480484

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

BOGOFF, LESTER H
5523 GULF OF MEXICO DR.
LONGBOAT KEY, FL 34228

**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

Wendy E. Brush - Clerk

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/15/04

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be Added to Fees

000000119609

04/19/04-80107-007-150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BOGOFF, GARY A
STREET ADDRESS	25 OLD MAIN ROAD
CITY-ST-ZIP	MONTGOMERY, MA 01085
TITLE	T
NAME	REITER, LESLY A
STREET ADDRESS	108 WOODSIDE DRIVE
CITY-ST-ZIP	LONGMEADOW, MA 01106
TITLE	S
NAME	BRUSH, WENDY E
STREET ADDRESS	72 GREEN HILL RD
CITY-ST-ZIP	LONGMEADOW, MA 01106
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)(l), 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

Wendy E. Brush - Clerk

4/15/04 413 567-9832