

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000028527

FILED  
Apr 01, 2009  
Secretary of State

Entity Name: B & C CONSOLIDATED INDUSTRIES, INC.

## Current Principal Place of Business:

1100 NW 54TH ST  
FT LAUDERDALE, FL 33309

## New Principal Place of Business:

1910 NW 18 ST  
BAY 1  
POMPANO BEACH, FL 33069

## Current Mailing Address:

1100 NW 54TH ST  
FT LAUDERDALE, FL 33309

## New Mailing Address:

1910 NW 18 ST  
BAY 1  
POMPANO BEACH, FL 33069

FEI Number: 65-0489935

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCRUTON, LINDA  
370 NE 24 ST.  
SUITE 2602  
BOCA RATON, FL 33431 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: PATTERSON, BRUCE D  
Address: 1100 NW 5TH ST  
City-St-Zip: FT LAUDERDALE, FL 33309

Title: VP ( ) Delete  
Name: DIFALCO, CHARLES E.  
Address: 1100 NW 5TH ST  
City-St-Zip: FT LAUDERDALE, FL 33309

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ANGELA WILLIAMS

MS

04/01/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date