

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2006 08:00 AM
Secretary of State

DOCUMENT # P94000032796

1. Entity Name
B & B MARINE ENTERPRISES, INC.



Principal Place of Business
**2155 GRAND BLVD.
HOLIDAY, FL 34690 US**

Mailing Address
**2155 GRAND BLVD.
HOLIDAY, FL 34690 US**



03282006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3236731** Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**BRUSH, LAWRENCE
2155 GRAND BLVD.
HOLIDAY, FL 34690**

**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 _____ (NOTE: Registered Agent signature required when registering) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BRUSH, LAWRENCE I
STREET ADDRESS	2155 GRAND BLVD
CITY-ST-ZIP	HOLIDAY, FL 34690
TITLE	VD
NAME	BRUSH, SAMUEL P
STREET ADDRESS	454 E ORANGE ST
CITY-ST-ZIP	TARPON SPRINGS, FL 34689
TITLE	STD
NAME	BAILLIE, SUSAN
STREET ADDRESS	2155 GRAND BLVD
CITY-ST-ZIP	HOLIDAY, FL 34690
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/02/06-80072-003 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 *Susan Baillie* *Susan Baillie* 4/14/06 352-5428249
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #