

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000031988

Entity Name: BMC TECHNOLOGIES, INC.

FILED  
Jan 03, 2006  
Secretary of State

## Current Principal Place of Business:

101 HERON TURN  
PANAMA CITY BEACH, FL 32407 US

## New Principal Place of Business:

## Current Mailing Address:

101 HERON TURN  
PANAMA CITY BEACH, FL 32407 US

## New Mailing Address:

FEI Number: 59-3310794

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BRUCE, BENGT  
101 HERON TURN  
#1  
PANAMA CITY, FL 32407 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: D ( ) Delete  
Name: WHITEHEAD, CATHARINA  
Address: 154 CANDLEWICK CIRCLE  
City-St-Zip: PANAMA CITY, FL

Title: VP ( ) Delete  
Name: WHITEHEAD, DAVID  
Address: 154 CANDLEWICK CIRCLE  
City-St-Zip: PANAMA CITY, FL

Title: T ( ) Delete  
Name: MATS, BRUCE  
Address: 4000 LEANN CIRCLE  
City-St-Zip: PANAMA CITY, FL 32401

Title: S ( ) Delete  
Name: MAGNUS, BRUCE  
Address: 505 LA COSTA  
City-St-Zip: LEANDER, TX 78641

Title: P ( ) Delete  
Name: BENGT, BRUCE  
Address: 101 HERON TURN  
City-St-Zip: PANAMA CITY, FL 32407

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: MATS BRUCE

VP

01/03/2006

Electronic Signature of Signing Officer or Director

Date