

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P95000053398

Entity Name: BSR ENTERPRISES, INC.

**FILED**  
**Mar 13, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

600 PARK ST.  
SEBRING, FL 33870

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 54  
SEBRING, FL 33871 US

**New Mailing Address:**

FEI Number: 65-0642950

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BOWEN, B T III  
623 PARK STREET  
SEBRING, FL 33870 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: BOWEN, B.T. III.  
Address: 600 PARK ST  
City-St-Zip: SEBRING, FL 33870

Title: VPD  
Name: BOWEN, B.T. IV.  
Address: 600 PARK ST.  
City-St-Zip: SEBRING, FL 33870

Title: STD  
Name: BOWEN, L.T.  
Address: 600 PARK ST.  
City-St-Zip: SEBRING, FL 33870

I hereby 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 all other like empowered.

SIGNATURE: B.T.BOWEN,III

PRES

03/13/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date