2005 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 08, 2005 08:00 AM Secretary of State ANNUAL REPORT **DOCUMENT # P95000081474** 1. Entity Name BIG BEND INVESTMENT CO. Principal Place of Business Mailing Address 2764 SUNSET POINT RD 2764 SUNSET POINT RD SUITE 200 SUITE 200 CLEARWATER, FL 33759 CLEARWATER, FL 33759 01072005 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3348278 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BABCOCK, CHARLES | III DO NOT WRITE 2764 SUNSET PT RD STE 200 CLEARWATER, FL 33759 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. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 П After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE BABCOCK, CHARLES I JR NAME STREET ADDRESS 2125 WINDWARD WAY STE 200 CITY-ST-ZIP VERO BEACH, FL 32963 1000000220233 VSTD TITLE NAME BABCOCK CHARLES III 02/08/05-80060-024 158.75 2764 SUNSET PT RD STE 200 STREET ADDRESS CITY-ST-ZIP CLEARWATER, FL 33759 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I heroby certify that the information supplied with this filing closs not qualify for the exemption stated in Section 119.07(3)(i), 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 CHARLES BUSCOCK!!!

SIGNATURE: _

STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

02.04.2005

791.0600

Daytime Phone #

FILED