

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # P96000031375

1. Entity Name  
BULLDOG ENVIRONMENTAL, INC.



Principal Place of Business  
1050 S.E. 6TH ST.  
LAKE BUTLER, FL 32054

Mailing Address  
1050 S.E. 6TH ST.  
LAKE BUTLER, FL 32054

**FILED  
May 01, 2008 08:00 AM  
Secretary of State**



04292008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3379465	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

PRITCHETT, M.H.  
HWY 121 S  
LAKE BUTLER, FL 32054

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution:

**\$5.00** May Be  
Added to Fees

U00000940702  
05/28/08-80073-023 150.00

10. OFFICERS AND DIRECTORS

TITLE P  
NAME PRITCHETT, MARVIN H  
STREET ADDRESS 1050 SE 6TH ST  
CITY-ST-ZIP LAKE BUTLER, FL

TITLE SV  
NAME PRITCHETT, JON W  
STREET ADDRESS 4106 SW 96TH DRIVE  
CITY-ST-ZIP GAINESVILLE, FL

TITLE D  
NAME PRITCHETT, PHILLIP W  
STREET ADDRESS 1050 SE 6TH ST  
CITY-ST-ZIP LAKE BUTLER, FL

TITLE D  
NAME WILSON, ROBIN P  
STREET ADDRESS 185 N W 4TH AVE  
CITY-ST-ZIP LAKE BUTLER, FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-08 (386)496-2630  
Date Daytime Phone #