


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

2/1 **FILED**  
**Mar 11, 2008 8:00 am**  
**Secretary of State**

02-13-2008 90020 045 \*\*\*150.00

**DOCUMENT # P97000063296**  
 1. Entity Name  
**BSM PROPERTIES INC.**



Principal Place of Business      Mailing Address  
**2706 ORLANDO DR**      **2706 ORLANDO DR**  
**SANFORD, FL 32732**      **SANFORD, FL 32732**

**66003174**



01072008    No Chg-P    CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-3504916</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent  
**MORAR, GOVIND**  
**2706 ORLANDO DR**  
**SANFORD, FL 32732**

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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering)

**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**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MORAR, GOVIND 2706 ORLANDO DR SANFORD, FL 32732
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MORAR, USHA 2706 ORLANDO DR SANFORD, FL 32732
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**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: Govind N. Morar      3/6/2008  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      (Date)      Daytime Phone #