


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2006 8:00 am
Secretary of State

01-27-2006 90024 018 ***158.75

DOCUMENT # P97000069220

1. Entity Name
B&D BUILDERS, INC.



Principal Place of Business Mailing Address

1285 OLD CHURCH RD 1285 OLD CHURCH RD
 CHIPLEY, FL 32428 US CHIPLEY, FL 32428 US

2. Principal Place of Business 3. Mailing Address

3101 FOURWIND DR **3101 FOURWIND DR**

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Chipley, FL **Chipley, FL**

Zip Country Zip Country

32428 **USA** **32428** **USA**

6. Name and Address of Current Registered Agent

NELSON, KAREN L
 1285 OLD CHURCH RD
 CHIPLEY, FL 32428

7. Name and Address of New Registered Agent

Name: **NELSON, GERALD D.**

Street Address (P.O. Box Number is Not Acceptable): **3101 FOURWIND DR**

City: **Chipley** State: **FL** Zip Code: **32428**

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: *Gerald D. Nelson* *Gerald D. Nelson P/S/T* *1-25-06*

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, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	NELSON, ROBERT T	
STREET ADDRESS	1285 OLD CHURCH RD	
CITY-ST-ZIP	CHIPLEY, FL 32428	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	NELSON, GERALD D	
STREET ADDRESS	3101 FOURWIND DR	
CITY-ST-ZIP	CHIPLEY, FL 32428	
TITLE	ST	<input checked="" type="checkbox"/> Delete
NAME	NELSON, KAREN	
STREET ADDRESS	1285 OF OLD CHURCH	
CITY-ST-ZIP	CHIPLEY, FL 32428	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P/S/T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NELSON, GERALD D.	
STREET ADDRESS	3101 FOURWIND DR	
CITY-ST-ZIP	CHIPLEY, FL 32428	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: *Gerald D. Nelson* *Gerald D. Nelson* *1-25-06* *850326-1346*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



01192006 Chg-P CR2E034 (11/05)

4. FEI Number Applied For

59-3491093 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required