

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 23, 2007 8:00 am
Secretary of State

01-23-2007 90015 003 ***150.00

DOCUMENT # P97000102790

1. Entity Name
B.B.I DEVELOPMENT, INC.



Principal Place of Business
2190 J&C BOULEVARD
NAPLES, FL 34109

Mailing Address
2190 J&C BOULEVARD
NAPLES, FL 34109

60004824



01052007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3502993	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MULLERSMAN, STEVEN J
2190 J & C BLVD.
NAPLES, FL 34109

**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, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MULLERSMAN, STEVEN J
STREET ADDRESS	2190 J&C BOULEVARD
CITY - ST - ZIP	NAPLES, FL 34109

TITLE	VTD
NAME	MASON, MONICA L
STREET ADDRESS	2190 J&C BOULEVARD
CITY - ST - ZIP	NAPLES, FL 34109

TITLE	VSD
NAME	MASON, JOSEPH L
STREET ADDRESS	2190 J&C BLVD.
CITY - ST - ZIP	NAPLES, FL 34109

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**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: Steven J. Mullersman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/19/07

239-591-0100
Date Daytime Phone #