

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P98000022364

1. Entity Name
BFS MANAGEMENT SERVICES, INC.



FILED
Apr 30, 2004 08:00 AM
Secretary of State

Principal Place of Business
**901 DONALD ROSS ROAD
JUNO BEACH, FL 33408**

Mailing Address
**901 DONALD ROSS ROAD
JUNO BEACH, FL 33408**



04282004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0827775	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

**BURDETT, F.R.
901 DONALD ROSS ROAD
JUNO BEACH, FL 33408**

**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, 2004 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	PCMD BURDETT, F R 901 DONALD ROSS ROAD JUNO BEACH, FL 33408
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VT BURDETT, F.R. 901 DONALD ROSS ROAD JUNO BEACH, FL 33408
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100019142236
04/30/04-60042-005 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does 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.

SIGNATURE: *F Burdett*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/2004

Date

561-625-3011

Daytime Phone #