2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 21, 2008 8:00 am Secretary of State

DOCUMENT # P98000057834 1. Entity Name BICA, INC.				07-21-2008 90029 041 ***550.00				
Principal Place of Business	Mailing Address			٩١				
455 COCONUT PALM ROAD	455 COCONUT PALM ROAD							
VERO BEACH, FL 32963	VERO BEACH, FL 3296					11 2016 2 1211 200	IBIBS IIIII BIX	1011 IEDI
D. Driverical Disease of Business No. D.O. Boy #	3. Mailing Address							
2. Principal Place of Business - No P.O. Box #	819 Beachland Blva.			\$	48 1 6 (198)		IARI II 1881	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		07152008	Chg-P	CR2E034	1 (12/06)		
City & State City & State Reach		ich	FL	4. FEI Number 59-3530			<u> </u>	plied For t Applicable
Zip Country	2 ^{Zip} 0 / 2	Countr	y 0'.44	5. Certificate	of Status Desired		8.75 Add	
	32965	Indi	an River	<u> </u>		_ F6	e Require	1
6. Name and Address of Current	Registered Agent		Name	/. Name and	Address of New R	tegistered Ag	ent	
GARRIS, CHARLES E		L						
819 BEACHLAND BLVD VERO BEACH, FL 32963			Street Address (P.O. Box Number is Not Acceptable)					
•		-	City			FL	Zip Code	
8. The above named entity submits this statement to	the evenes of changing its		d allina as spaintas	ad accest or bot	h is the State of Els		milior with	and accept
the obligations of registered agent.	the pulpose of changing its	registeret	TOUCE OF JEBISTER	ed agent, or bot	ii, iii tile State of Fit	onda. Tamiai	Allica Wipi,	and accept
SIGNATURE	NOTE (NOTE	: Remetered	Agent signature required	when reinstation)		DATE		
FILE NOW!!! FEE IS \$550.00 Due by September 12, 2008	9. Election Campaig Trust Fund Contr			.00 May Be ed to Fees				
10. OFFICERS AND	DIRECTORS	11.		ADDITIONS/	CHANGES TO OFF			
TITLE DP	☐ Delete	TITLE				[Change	☐ Addition
NAME STUTT, WILLIAM C STREET ADDRESS 455 COCONUT PALM ROAD		NAME	T ADDRESS					
CITY-ST-ZIP VERO BEACH, FL 32963		CITY-S	!					-
TITLE DTS	☐ Delete	TITLE				í	Change	Addition
NAME STUTT, CAROLYN L		NAME				·		_
STREET ADDRESS 455 COCONUT PALM ROAD			T ADDRESS					1
CITY-ST-ZIP VERO BEACH, FL 32963		CITY-S	ST-ZIP					
TITLE	☐ Delete	TITLE NAME				l	Change	Addition
NAME STREET ADDRESS			T ADDRESS					
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14/ 84/16	☐ Delete	TITLE NAME]	Change	
STREET ADDRESS	☐ Delete	NAME STREET	T ADORESS			[Change	Addition
I		NAME STREET CITY-S						
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	☐ Delete	NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME	T ADDRESS T ADDRESS T ADDRESS			[_] Change	☐ Addition

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

7/16/08 (772-234-1339

William C. Stutt, President of BICA, Inc.