

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

4/1

FILED
May 12, 2006 8:00 am
Secretary of State

04-24-2006 90420 036 ***150.00

DOCUMENT # P98000066389

1. Entity Name
B & B SERVICES OF SARASOTA, INC.



Principal Place of Business
**1226 ZACCHINI AVE
SARASOTA, FL 34237**

Mailing Address
**4228 PLACID DRIVE
SARASOTA, FL 34243**



02272006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0852554

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**BUTZ, WILLIAM M
4228 PLACID DRIVE
SARASOTA, FL 34243**

**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 William M. Butz, PRES. WILLIAM M. BUTZ
Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reinstating)

4/15/06
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

B. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
BUTZ, WILLIAM M
4228 PLACID DRIVE
SARASOTA, FL 34243**

TITLE
NAME
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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: William M. Butz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**WILLIAM M. BUTZ
PRES.**

4/15/06 941-953-5545
Date Daytime Phone #