2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000108017

FRAZIER, GLÉNDA C

PANAMA CITY, FL 32405

717 BRANDEIS AVE

Name:

Address:

City-St-Zip:

FILED Jan 15, 2009 Secretary of State

Entity Nar	ne: BENC	H MARK PLUM	BING OF BAY COL	UNTY INC.						
Current Principal Place of Business:					New Principal Place of Business:					
3509 D ST PANAMA (REET DITY, FL 32	2405								
Current Mailing Address:					lew Mailir	ng Addres	s:			
717 BRANI PANAMA (DEIS AVE CITY, FL 32	2405								
FEI Number:	59-3548752	FEI Number	Applied For ()	FEI Numbe	er Not Appli	cable ()	Cert	ificate of Stat	tus Desired ()	
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:					
FRAZIER, CHARLES R 717 BRANDER'S AVE PANAMA CITY, FL 32405 US					FRAZIER, CHARLES R 717 BRANDEIS AVE PANAMA CITY, FL 32405 US					
The above in the State	named enti e of Florida.	ty submits this	statement for the p	urpose of c	hanging it	s registere	d office	or registere	d agent, or b	oth,
SIGNATURE: CHARLES R. FRAZIER					01/15/2009					
	Elect	ronic Signature	of Registered Age	nt				Date		
Election Can	npaign Finan	cing Trust Fund C	ontribution ().							
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
Title: Name: Address: City-St-Zip:	717 BRAND	() Delete HARLES R SR EIS AVE TY, FL 32405		N: Ac	itle: ame: ddress: ity-St-Zip:		() Chan	ge () Additio	n	
Title: Name: Address: City-St-Zip:	VS KENDRICK, P.O. BOX 1 PANAMA CI			N: Ac	itle: ame: ddress: ity-St-Zip:	VS KENDRICK, P. O. BOX 4 FOUNTAIN,	, BOBBY I 143		on.	
Title:	ST	() Delete		Ti	itle:		() Chan	ae () Additio	n	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: GLENDA C. FRAZIER ST 01/15/2009