

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000027534

Entity Name: B.C.D.L. ENTERPRISES, INC.

FILED
Apr 25, 2006
Secretary of State

Current Principal Place of Business:

203 38TH AVE. NORTH
ST PETERSBURG, FL 33704

New Principal Place of Business:

4949 34TH STREET S
ST PETERSBURG, FL 33711

Current Mailing Address:

203 38TH AVE. NORTH
ST PETERSBURG, FL 33704

New Mailing Address:

FEI Number: 59-3567801 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUCHANAN, ROBERT A II
15601 GULF BOULEVARD
REDINGTON BEACH, FL 33708 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: BUCHANAN, ROBERT A II
Address: 15601 GULF BOULEVARD
City-St-Zip: REDINGTON BEACH, FL 33708

Title: VPT () Delete
Name: UNGER, CINDIE
Address: 1237 BRIGHT WATERS BLVD NE
City-St-Zip: ST PETERSBURG, FL 33704

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: ROBERT A BUCHANAN II

PS

04/25/2006

Electronic Signature of Signing Officer or Director

_____ Date