2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 09, 2004
Secretary of State

DOCUMENT# S15552

Entity Name: BW PROPERTIES OF NW FLA., INC.

Current Principal Place of Business:

C/O BOBBY WARNER
524 E. ZARAGOZA ST.
PENSACOLA, FL 32501 US

New Principal Place of Business:

Current Mailing Address:

1804 E LARUA STREET
PENSACOLA, FL 32501 US

New Mailing Address:

FEI Number: 59-3044998 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WARNER, BOBBY
1804 E LARUE STREET
PENSACOLA, FL 32501 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PST ( ) Delete
Name: WARNER, BOBBY
Address: 1804 E LA RUE STREET
City-St-Zip: PENSACOLA, FL 32501

Title: VD ( ) Delete
Name: WARNER, BOBBY
Address: 1804 E LA RUA STREET
City-St-Zip: PENSACOLA, FL 32501

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T ( ) Change (X) Addition
Name: STEPHENS, DON
Address: 1804 E. LA RUA STREET
City-St-Zip: PENSACOLA, FL 32501

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BOBBY WARNER PST 08/09/2004

Electronic Signature of Signing Officer or Director Date