

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 125973

Entity Name: BEALL'S, INC.

FILED
Jan 29, 2009
Secretary of State

Current Principal Place of Business:

1806 38TH AVENUE EAST
BRADENTON, FL 34208

New Principal Place of Business:

Current Mailing Address:

PO BOX 25207
ATTN S M KNOPIK
BRADENTON, FL 34206 US

New Mailing Address:

FEI Number: 59-0243800 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNOPIK, STEPHEN
1806 38TH AVE E
BRADENTON, FL 34208 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: STVP () Delete
Name: MADDALONI, MICHAEL
Address: 1806 38TH AVE E
City-St-Zip: BRADENTON, FL 34208

Title: C () Delete
Name: BEALL, ROBERT M, II,
Address: 1806 38TH AVE. EAST
City-St-Zip: BRADENTON, FL 34208

Title: D () Delete
Name: WALTERS, CLIFFORD,
Address: 1806 38TH AVE. EAST
City-St-Zip: BRADENTON, FL 34208

Title: PDST () Delete
Name: KNOPIK, STEPHEN M.,
Address: 1806 38TH AVE. EAST
City-St-Zip: BRADENTON, FL 34208

Title: D () Delete
Name: CLARENCE, ANTHONY
Address: 1806 38 AVE E
City-St-Zip: BRADENTON, FL 34208

Title: CFO () Delete
Name: LOVE, DAN
Address: 1806 35TH AVE EAST
City-St-Zip: BRADENTON, FL 34208

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TVP (X) Change () Addition
Name: MADDALONI, MICHAEL
Address: 1806 38TH AVE E
City-St-Zip: BRADENTON, FL 34208

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

Title: VC (X) Change () Addition
Name: WALTERS, CLIFFORD,
Address: 1806 38TH AVE. EAST
City-St-Zip: BRADENTON, FL 34208

Title: PD (X) Change () Addition
Name: KNOPIK, STEPHEN M.,
Address: 1806 38TH AVE. EAST
City-St-Zip: BRADENTON, FL 34208

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 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: MICHAEL MADDALONI

TVP

01/29/2009

Electronic Signature of Signing Officer or Director

_____ Date