2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 41572		2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)			
BEASLEY AND SON INC	2 		Secretary of State 04-21-2003 91189 033 ***150.00		
Principal Place of Business 4922 56TH ST TAMPA FL 33610	Mailing Address 4922 56TH ST TAMPA FL 33610	•			
t. Principal Place of Business 3. Mailing Address			T (BAN) DIREC (ADA DIVIN LEGIC MAND MAN BURN GIGH BURN GIRN BURN GIRN BURN GIRN GIRN GIRN GIRN GIRN GIRN GIRN GI		
Suite, Apt. #, etc. Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES		
City & State	City & State		4. FEI Number 59-1441340 Applied For Not Applicable		
Zip Country	Zip	Country	5. Certificate of Status Desired See Required Fee Required		
6. Name and Address of Current	Registered Agent	Nome	7. Name and Address of New Registered Agent		
BEASLEY, ROGER R 8204 W FRANKLIN RD. PLANT CITY FL 33565			oger R. Beasley ress (P.O. Box Number is Not Acceptable) 31 Pippin Rd		
the obligations of registered agent. SIGNATURE Signature, if ped or printed name of regisfred agent a	Roger R.Be	registered office or re	Int City FL Zip Code 33567 gistered agent, or both, in the State of Florida. I am familiar with, and accept April 16, 2003 equired when reinstating) DATE		
FILE NOW!!! FEE IS \$150.00 SAfter May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of OFFICERS AND		11.	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE VD NAME STREET ADDRESS CITY-ST-ZIP TAMPA FL	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANGES TO OPPICERS AND DIRECTORS IN T		
TITLE PD NAME BEASLEY, ROGER R. STREET ADDRESS CITY-ST-ZIP PLANT CITY FL	☐ Delete	, TITLE NAME STREET ADDRESS CITY-ST-ZIP	x⊠ Change ☐ Addition Beasley, Roger R. 4531 Pippin Rd∵ Plant city, Fla. 33567		
NAME STREET ADDRESS CITY-ST-ZIP ST	Delete	TITLE - NAME STREET ADDRESS CITY-ST-ZIP	Beasley, Gizella 4922 N. 56th. St Tampa, Fla. 33610		
VP FRANKLIN, RICHARD 3711 N GARRISON TAMPA FL 33619	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	. Change Addition		
TITLE VP NAME FLOWERS, JOHN STREET ADDRESS CITY-ST-ZIP SAN ANTONIO FL 33576	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
ITLE IAME STREET ADDRESS CITY- ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition		
indicated on this report or supplemental report is of the corporation or the receiver or trustee emportanged, or on an attachment with an address, where the supplemental report is of the corporation of t	true and accurate and that newered to execute this report with all other like empowered.	ny signature shall have as required by Chapte	in Section 119.07(3)(i), Florida Statutes. I further certify that the information e the same legal effect as if made under oath; that I am an officer or director of 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if Ley April 16, 2003 Batter Proce 6		