

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000044545

FILED
Jan 03, 2005
Secretary of State

Entity Name: BEACON-NATIONAL INSURANCE ASSOCIATES, INC.

Current Principal Place of Business:

96 TALL TREES COURT
SARASOTA, FL 34232

New Principal Place of Business:

Current Mailing Address:

PO BOX 2662
SARASOTA, FL 34230

New Mailing Address:

FEI Number: 13-4271269

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DANSON, THOMAS E JR
96 TALL TREES COURT
SARASOTA, FL 34232 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: CEO () Delete
Name: DANSON, THOMAS E JR.
Address: 96 TALL TREES CT
City-St-Zip: SARASOTA, FL 34232

Title: VPDS () Delete
Name: BOGUSZ, ANNETTE
Address: 6835 PINDO BLVD
City-St-Zip: SARASOTA, FL 34241

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 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: THOMAS E DANSON, JR

CEO

01/03/2005

Electronic Signature of Signing Officer or Director

Date