2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000044545

Entity Name: BEACON-NATIONAL INSURANCE ASSOCIATES, INC.

FILED Jan 08, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

96 TALL TREES COURT 1259 BENEVA ROAD, S SARASOTA, FL 34232 SARASOTA, FL 34232

Current Mailing Address: New Mailing Address:

PO BOX 2662 SARASOTA, FL 34230

FEI Number: 13-4271269 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DANSON, THOMAS E JR DANSON, THOMAS E JR 96 TALL TREES COURT 1259 BENEVA ROAD, S SARASOTA, FL 34232 US US SARASOTA, FL 34232

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: 01/08/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEOD CEOD () Delete Title: (X) Change () Addition DANSON, THOMAS E JR. DANSON, THOMAS E JR. Name: Name: 96 TALL TREES CT 96 TALL TREES CT Address: Address:

City-St-Zip: SARASOTA, FL 34232 City-St-Zip: SARASOTA, FL 34232 US

Title: **VPDS** Title: **VPS** (X) Change () Addition () Delete Name: BOGUSZ, ANNETTE Name: BOGUSZ, ANNETTE MS 6835 PINDO BLVD 6835 PINDO BLVD Address: Address: SARASOTA, FL 34241 SARASOTA, FL 34241 US City-St-Zip: City-St-Zip:

Title: Title: SVPD () Delete () Change (X) Addition

HARDING, BARRIE MR Name: Name: 1259 BENEVA ROAD, S Address Address: City-St-Zip: City-St-Zip: SARASOTA, FL 34232 US

Title: () Delete Title: VPD () Change (X) Addition

BOGUSZ, TED G MR Name: Name: Address: Address: 6835 PINDO BLVD City-St-Zip: City-St-Zip: SARASOTA, FL 34241 US

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: THOMAS E. DANSON, JR CEO 01/08/2006