

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 21, 2001 8:00 am**  
**Secretary of State**

05-21-2001 90406 033 \*\*\*150.00

DOCUMENT # P 97000023696

1. Entity Name  
 Beech Outdoor, Inc. *NO Name Change*

Principal Place of Business Mailing Address (same)  
 1672 Indian Dance Ct.  
 Maitland, FL 32751

C0068768

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business *same* 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **593446805** Applied For Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 Rex L. Beech  
 1672 Indian Dance Ct.  
 Maitland, FL 32751

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City FL Zip Code

8. 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS  
 TITLE NAME  Delete  
 Rex L. Beech  
 STREET ADDRESS 1672 Indian Dance Ct.  
 CITY-ST-ZIP Maitland FL 32751

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  
 TITLE NAME  Change  Addition

TITLE NAME  Delete  
 John L. Morgan  
 STREET ADDRESS 1520 Whitesstable Ct  
 CITY-ST-ZIP Lake Mary FL 32746

TITLE NAME  Change  Addition

TITLE NAME  Delete

TITLE NAME  Change  Addition

TITLE NAME  Delete

TITLE NAME  Change  Addition

TITLE NAME  Delete

TITLE NAME  Change  Addition

TITLE NAME  Delete

TITLE NAME  Change  Addition

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other, as empowered.

SIGNATURE: *[Signature]*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/01 407 045-2210  
 Date Daytime Phone #

CFR2E034 (11/00)