2001 UNIFORM BUSINESS REPORT (UBR)

Secretary of State ORS-31-2001 90112 033 ***150.00 Secretary of State ORS-31-2001 90112 033 ***150.00 Secretary of State ORS-31-2001 90112 033 ***150.00 A0083178 ***Principal Place of Business 1009 SIXTH STN W WINTER HAVEN FL. 2009 DO NOT WRITE IN THIS SPACE DO NOT WRITE	200	1 UNIFORM	BUSII	NESS REPO	RT (UB	BR)	FI	LED		0123654
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### A0083178 ### WINTER HAVEN R. 28881 Suite, Apr. 4, etc.						(IR)	08-31-2001 90)112 023 ***150.0)()	
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Sulfa, Apt. 4, etc. City 6 State Country Zip Country S. Certificate of Status Desired S. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BEASLEY, WILLIAM R. 1009 SXITH STREET, N.W. WINTER HAVEN FL 33880 Signer, Address (P.O. Box Number in Not Acceptable) City FL Zip Code Signer, Address (P.O. Box Number in Not Acceptable) City FL Zip Code City FL Zip Code After Signess Agent a										
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S. Certificate of Status Desired \$6. Name and Address of Current Registered Agent \$7. Name and Address of New Registered Agent \$7. Name and Address \$7. Name and Address of New Registered Agent \$7. Name a	City & Sta	te		City & State		4.	FEI Number 59-1794749			}
BEASLEY, WILLIAM R. 1009 SIXTH STREET, N.W. WINTER HAVEN FL 33880 City FL Zip Code 6. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. SIGNATURE Grants, types or priesd name diregisted agent and the if eighted in Register Apert Spream From the Spream From th	Zip				Country	5.	Certificate of Status Desired			
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WINTER HAVEN FL 33880 City FL Zip Code City FL	BEASLEY, WILLIAM R.									
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. SIGNATURE Syname, types or printed name of registered agent and site. It applicable. (NOTE, Registered Agent surpature required aren remainstrip). DATE 9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do So. After September 12, 2001 Fee will be \$750.00	1009 SIXTH STREET, N.W.					Address (P.O. E	Box Number is Not Acceptable;	l		
B. 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	WINTER I	HAVEN FL 33880								
SIGNATURE 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. After September 12, 2001 Fee will be \$750,00					City		-	FL Zip Cod	e	
SIGNATURE 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. After September 12, 2001 Fee will be \$750,00	8. The above	named entity submits this s	statement for th	e purpose of changing its	registered office	or registered ag	gent, or both, in the State of Flor	ida.		1
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (Sea criteria on back) S5.00 May Be Added to Fees	SIGNATURE									
Tax filing requirement and elects to do so. (Sae criterian on back) Make Check Payable to Department of State Trust Fund Contribution. \$5.00 May 8e Added to Fees		Signature, typed or printed name of n	egistered agent and	itle if applicable. (NOTE	: Registered Agent sign	ature required when re	einstating)	DATE		
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TO WHOM IT MAY CONCERN,

I AM ENCLOSING A CHECK FOR \$150.00 AS THIS IS WHAT I HAVE PAID IN THE PAST. I DONOT KNOW WHY I DID NOT RECEIVE THE 1ST STATEMENT, AS I HAVE ALWAYS PAID ON TIME. PLEASE ACCEPT THIS PAYMENT. I HAVE MADE A NOTE ON MY COMPUTER TO CHECK IN JANURAY OF EACH YEAR TO PAY THIS BILL. I WILL NOT BE LATE IN THE FUTURE.

SINCERELY

WILLIAM R BEASLEY, PRESIDENT

BEASLEY REALTY CONC.