2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 06, 2009
Secretary of State

DOCUMENT# 568981

Entity Name: BECKOM'S GLASS, INC.

Current Principal Place of Business:

167 JAMES ST
VENICE, FL 34292 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 282
LAUREL, FL 34272

New Mailing Address:

FEI Number: 59-1810887 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BECKOM, WILLIE J.,JR.
732 HIDERBERG ST
LAUREL, FL 34272 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: STD ( ) Delete
Name: BECKOM, BEATRICE,
Address: 732 HIDERBERG ST.
City-St-Zip: LAUREL, FL 34272

Title: D ( ) Delete
Name: BECKOM, WILLIE J.,
Address: 732 HIDERBERG ST
City-St-Zip: LAUREL, FL 34272

Title: PD ( ) Delete
Name: BECKOM, ARMON,
Address: 12151 KINGBURY AVE
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: VPD ( ) Delete
Name: BECKOM, KARL,
Address: 727 CHURCH ST
City-St-Zip: LAUREL, FL 34272

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 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: BEATRICE L. BECKOM STD 01/06/2009
Electronic Signature of Signing Officer or Director Date