

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 698961

FILED
Apr 24, 2007
Secretary of State

Entity Name: BEAUMONT & BROWN DEVELOPMENT, INC.

Current Principal Place of Business:

2754 SW MARIPOSA CIRCLE
PALM CITY, FL 34990

New Principal Place of Business:

6791 SE TWIN OAKS CIRCLE
STUART, FL 34997

Current Mailing Address:

2754 SW MARIPOSA CIRCLE
PALM CITY, FL 34990

New Mailing Address:

PO BOX 2049
PALM CITY, FL 34991

FEI Number: 59-2106433

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEAUMONT, ANTHONY D
2754 SW MARIPOSA CIRCLE
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

BEAUMONT, ANTHONY D
6791 SE TWIN OAKS CIRCLE
STUART, FL 34997 US

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: ANTHONY D BEAUMONT

04/24/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BEAUMONT, ANTHONY D
Address: 2754 SW MARIPOSA CIRCLE
City-St-Zip: PALM CITY, FL 34990 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BEAUMONT, ANTHONY D
Address: 6791 SE TWIN OAKS CIRCLE
City-St-Zip: STUART, FL 34997 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: ANTHONY D BEAUMONT

PRES

04/24/2007

Electronic Signature of Signing Officer or Director

Date