

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757694

FILED  
Apr 21, 2010  
Secretary of State

**Entity Name:** BEALSVILLE, INCORPORATED

**Current Principal Place of Business:**

5104 HORTON ROAD  
PLANT CITY, FL 33567

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 3623  
PLANT CITY, FL 33563

**New Mailing Address:**

**FEI Number:** 59-2344868

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DAVIS, HENRY M  
2104 E. BEAL RD.  
PLANT CITY, FL 33567 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: DAVIS, HENRY M  
Address: 2104 E. BEAL RD.  
City-St-Zip: PLANT CITY, FL 33567

Title: D  
Name: THOMAS, WILLIAM  
Address: 5602 JOE KING RD  
City-St-Zip: PLANT CITY, FL 33567

Title: TD  
Name: INGRAM, ARTHUR  
Address: 4701 SMITH RYALS RD  
City-St-Zip: PLANT CITY, FL 33567

Title: SD  
Name: ROGERS HARGRETT, VIRGINIA  
Address: 2502 STATE RD 60 EAST  
City-St-Zip: PLANT CITY, FL 33567

Title: CD  
Name: HARGRETT, HERMAN J.  
Address: 2502 STATE RD 60 EAST  
City-St-Zip: PLANT CITY, FL 33567

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WILLIAM M. THOMAS

D

04/21/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date