

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004684

Entity Name: KATHRYN BEICH, INC.

FILED
Apr 07, 2006
Secretary of State

Current Principal Place of Business:

2 ACCESS WAY
BLOOMINGTON, IL 61704

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2914
ATTN: CORP. TAX DEPT
BLOOMINGTON, IL 61702 US

New Mailing Address:

FEI Number: 05-0528175 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: D () Delete
Name: BAGIN, DOUGLAS
Address: 7 RUNNING TIDE ROAD
City-St-Zip: CAPE ELIZABETH, ME 04107

Title: SVD () Delete
Name: HENRY, GEORGE
Address: 15 W. 64TH STREET, APT. 2A
City-St-Zip: NEW YORK, NY 10023

Title: DVT () Delete
Name: LEE, MICHAEL
Address: 20 E 22ND STREET, APT. 3D
City-St-Zip: NEW YORK, NY 10010

Title: D () Delete
Name: HALL, WILLIAM A
Address: 75-171 PEPPERWOOD DRIVE
City-St-Zip: INDIAN WELLS, CA 92210

Title: DP () Delete
Name: HOLZWORTH, MICHAEL
Address: 7 CURRIE COURT
City-St-Zip: BLOOMINGTON, IL 61704

Title: DV () Delete
Name: RICHARDSON, RICK
Address: 928 WEST AUSTIN DRIVE
City-St-Zip: PEORIA, IL 61614

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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Address:
City-St-Zip:

Title: () Change () Addition
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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 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: MICHAEL HOLZWORTH

PRES

04/07/2006

Electronic Signature of Signing Officer or Director

Date