

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002586

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: BEVAL SADDLERY LTD INCORPORATED

## Current Principal Place of Business:

PO BOX 612 PARK AVE  
GLADSTONE, NJ 07934

## New Principal Place of Business:

10 PARK AVE  
GLADSTONE, NJ 07934

## Current Mailing Address:

PO BOX 612 PARK AVE  
GLADSTONE, NJ 07934

## New Mailing Address:

PO BOX 612  
GLADSTONE, NJ 07934

FEI Number: 22-1821132

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WALTER, MARK  
14440 PEARSON RD  
WELLINGTON, FL 33414 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: CP ( ) Delete  
Name: WALTER, MARK  
Address: 17 SUGARBUSH CT  
City-St-Zip: WILTON, CT 06897

Title: VCCP ( ) Delete  
Name: SPINKS, THOMAS  
Address: PO BOX 38  
City-St-Zip: POTTERSVILLE, NJ 07979

Title: DST ( ) Delete  
Name: WALTER, LOIS  
Address: PO BOX 18  
City-St-Zip: POTTERSVILLE, NJ 07979

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VCCP (X) Change ( ) Addition  
Name: SPINKS, THOMAS  
Address: 5 ANN ST  
City-St-Zip: BERNARDSVILLE, NJ 07924

Title: DST (X) Change ( ) Addition  
Name: WALTER, LOIS  
Address: 5 ANN ST  
City-St-Zip: BERNARDSVILLE, NJ 07924

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: THOMAS SPINKS

VP

04/15/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date