

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004501

Entity Name: BECO, INC.

FILED
Jan 12, 2009
Secretary of State

Current Principal Place of Business:

123 A CARL VINSON PKWY
WARNER ROBINS, GA 31088

New Principal Place of Business:

Current Mailing Address:

123 A CARL VINSON PKWY
WARNER ROBINS, GA 31088

New Mailing Address:

FEI Number: 74-2776939

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR
WESTON, FL 33331 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: WELLS, ROGER L
Address: 129 WISTERIA DR
City-St-Zip: BONAIRE, GA 31005

Title: VP () Delete
Name: OWENS, STEVEN W
Address: 1613 MOUNT CROGHAN TRAIL
City-St-Zip: THE VILLAGES, FL 32162

Title: VC/S () Delete
Name: WELLS, SHERRY
Address: 129 WISTERIA DRIVE
City-St-Zip: BONAIRE, GA 31005

Title: VP () Delete
Name: GOODMAN, CHARLES
Address: 329 ED CARSON DRIVE
City-St-Zip: AMERICUS, GA 31709

Title: VP () Delete
Name: WELLS, OTIS G
Address: 5 LAKEVIEW DR.
City-St-Zip: WINFIELD, WV 25213

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:

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: SHERRY A. WELLS

VC/S

01/12/2009

Electronic Signature of Signing Officer or Director

Date