

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000001616

FILED  
Feb 17, 2011  
Secretary of State

**Entity Name:** THE BEUTH FOUNDATION (INC)

**Current Principal Place of Business:**

873 BARCARMIL WAY  
NAPLES, FL 34110

**New Principal Place of Business:**

**Current Mailing Address:**

873 BARCARMIL WAY  
NAPLES, FL 34110

**New Mailing Address:**

**FEI Number:** 06-1479737

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BEUTH, PHILIP R  
873 BARCARMIL WAY  
NAPLES, FL 34110 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:** P  
**Name:** BEUTH, PHILIP R  
**Address:** 873 BARCARMIL WAY  
**City-St-Zip:** NAPLES, FL 34110

**Title:** V  
**Name:** BEUTH MAYER, JANE M  
**Address:** 5636 MATILIJA AVENUE  
**City-St-Zip:** VAN NUYS, CA 91401

**Title:** ST  
**Name:** BEUTH, MARY G  
**Address:** 873 BARCARMIL WAY  
**City-St-Zip:** NAPLES, FL 34110

**Title:** D  
**Name:** BEUTH, PHILIP S  
**Address:** 5 ALDAYA LANE  
**City-St-Zip:** HOT SPRINGS VILLAGE, AR 71909 US

**Title:** D  
**Name:** BEUTH, ROBERT A  
**Address:** 5751 MATILIJA AVENUE  
**City-St-Zip:** VAN NUYS, CA 91401

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:** PHILIP R. BEUTH

PRES

02/17/2011

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

\_\_\_\_\_  
Date