2000 UNIFORM BUSINESS REPORT (UBR)

3. Mailing Address

City & State

Suite, Apt. #, etc.

DOCUMENT # F9400002009

Country

Entity Name

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

BEASLEY FM ACQUISITION CORP.

Principal Place of Business	Mailing Address
SUITE 200	SUITE 200
3033 RIVIERA DRIVE	3033 RIVIERA DRIVE
NAPLES FL 33940	NAPLES FL 34103-2750

FILED May 09, 2000 8:00 am Secretary of State

05-09-2000 90104 034 ***150.00



Zip Code

FL

6. Name and Address of Current Registered Agent	7. Name and Address of New Yorgist
	Name
THE PRENTICE-HALL CORPORATION SYSTEM, INC. SUITE 105 1201 HAYS STREET TALLAHASSEE FL 32301	Street Address (P.O. Box Number is Not Acceptable) City

6. The ac	ove named entity submits this statement	tor the purpose or one	anging its registered office of registered	agent, or both, in the otate of Frontie	••	
SIGNATUR	Signature, typed or printed name of registered age	nt and title if applicable	(NOTE: Registered Agent signature required whe	en reinstating)	DATE	
Tax fili	orporation is eligible to satisfy its Intangib ng requirement and elects to do so. riteria on back)	After N	E NOW!!! FEE IS \$150.00 IAY 1, 2000 Fee will be \$550.00 ck Payable to Department of State	10. Election Campaign Financ Trust Fund Contribution.	ing	\$5.00 May Be Added to Fees
11	OFFICERS AN	D DIRECTORS	12.	ADDITIONS/CHANGES TO OFFICE	RS AND DI	RECTORS IN 11

Country

11.	OFFICERS AND DIRECTORS		12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD	☐ Delete	TITLE		☐ Change	☐ Addition
NAME	BEASLEY, BRUCE		NAME			
STREET ADDRESS	3033 RIVIERA DR., #200		STREET ADDRESS			!
CITY-ST-ZIP	NAPLES FL		CITY-ST-ZIP			
TITLE	DV	☐ Delete	TITLE		Change	☐ Addition
NAME	BEASLEY, SHIRLEY		NAME			
STREET ADDRESS	3033 RIVIERA DRIVE, SUITE 200		STREET ADDRESS			
CITY-ST-ZIP	NAPLES FL 33940		CITY-ST-ZIP			
TITLE	SD_	Delete	ŢĬĬĹĔ	, where the second second	Change	Addition A
NAME	BEASLEY, CAROLINE		NAME			
STREET ADDRESS	3033 RIVIERA DRIVE, SUITE 200		STREET ADDRESS			
CITY-ST-ZIP	NAPLES FL 33940		CITY-ST-ZIP			
TITLE	CEOT	☐ Delete	TITLE		Change	☐ Addition
NAME	BEASLEY, GEORGE G		NAME			
STREET ADDRESS	3033 RIVIERA DRIVE, SUITE 200		STREET ADDRESS			
CITY-ST-ZIP	NAPLES FL 33940		CITY-ST-ZIP			
TITLE	VPD	☐ Delete	TITLE		Change	Addition
NAME	BEASLEY, BRIAN		NAME			
STREET ADDRESS	3033 RIVIERA DR. #200		STREET ADDRESS			
CITY-ST-ZIP	NAPLES FL		CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		Change	Addition
NAME			NAME			
STREET ADDRESS			STREET ADDRESS			
CITY-ST-7IP	1		CITY-ST-ZIP			

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (9/9