

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000005126

FILED
Mar 09, 2009
Secretary of State

Entity Name: J.M. BEALS ENTERPRISES, INC.

Current Principal Place of Business:

BEALS BONITA BLDG
4061 BONITA BCH RD STE 104
BONITA SPRINGS, FL 34134 US

New Principal Place of Business:

Current Mailing Address:

BEALS BONITA BUILDING
4061 BONITA BEACH RD., SUITE 104
BONITA SPRINGS, FL 34134 US

New Mailing Address:

FEI Number: 36-2593104

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DATI, JAMES D ESQ.
4001 TAMIAMI TRAIL NORTH
SUITE 250
NAPLES, FL 34103 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: BEALS, JAMES M
Address: 8606 WEST ROUTE 176
City-St-Zip: CRYSTAL LAKE, IL 60014

Title: DST () Delete
Name: BEALS, PEARL J
Address: 8606 WEST ROUTE 176
City-St-Zip: CRYSTAL LAKE, IL 60014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JAMES M. BEALS

PRES

03/09/2009

Electronic Signature of Signing Officer or Director

Date