

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000001207

FILED  
Jul 08, 2008  
Secretary of State

Entity Name: BEACON VENTURE MANAGEMENT CORPORATION II

**Current Principal Place of Business:**

78 EMERALD OAKS LANE  
ORMOND BEACH, FL 32174 US

**New Principal Place of Business:**

220 S. RIDGEWOOD AVE  
130  
DAYTONA BEACH, FL 32114 US

**Current Mailing Address:**

78 EMERALD OAKS LANE  
ORMOND BEACH, FL 32174 US

**New Mailing Address:**

220 S. RIDGEWOOD AVE  
130  
DAYTONA BEACH, FL 32114 US

FEI Number: 04-3302109

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PST ( ) Delete  
Name: NOLFI, FRANK V JR  
Address: 78 EMERALD OAKS LN.  
City-St-Zip: ORMOND BEACH, FL 32174

Title: DC ( ) Delete  
Name: NOLFI, FRANK V JR  
Address: 78 EMERALD OAKS LN.  
City-St-Zip: ORMOND BEACH, FL 32174

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PST (X) Change ( ) Addition  
Name: NOLFI, FRANK V JR  
Address: PO BOX 580  
City-St-Zip: TRYON, NC 28782

Title: DC (X) Change ( ) Addition  
Name: NOLFI, FRANK V JR  
Address: PO BOX 580  
City-St-Zip: TRYON, NC 28782

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: FRANK V NOLFI

PRES

07/08/2008

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

\_\_\_\_\_  
Date