


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Feb 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **G44745** (9)
1. Corporation Name
BEALL'S OUTLET STORES, INC.

Principal Place of Business % ROBERT M. BEALL, II 1806 38TH AVENUE EAST BRADENTON FL 34208	Mailing Address PO BOX 25207 ATT SM KNOPIK BRADENTON FL 34206 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 06/22/1983	Applied For <input type="checkbox"/> Not Applicable
4. FEI Number 59-2300898	
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent
**BEALL, ROBERT M., II
1806 38TH AVENUE EAST
BRADENTON FL 33508**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors; I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (Signature, typed or printed name of registered agent and title if applicable.) (NOTE: Registered Agent signature required when reinstating.) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	C	<input type="checkbox"/> DELETE
NAME	BEALL, ROBERT M II	
STREET ADDRESS	1806 38TH AVE E	
CITY-ST-ZIP	BRADENTON FL 34208	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BEALL, E R	
STREET ADDRESS	1806 38TH AVE E	
CITY-ST-ZIP	BRADENTON FL 34208	
TITLE	P	<input type="checkbox"/> DELETE
NAME	GALIZIA, PAUL C	
STREET ADDRESS	1806 38TH AVE E	
CITY-ST-ZIP	BRADENTON FL 34208	
TITLE	VPST	<input type="checkbox"/> DELETE
NAME	KNOPIK, STEPHEN M.	
STREET ADDRESS	1806 38TH AVE E	
CITY-ST-ZIP	SARASOTA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SZYMANSKI, BETTY	
STREET ADDRESS	1806 38 AVE E	
CITY-ST-ZIP	BRADENTON FL 34208	
TITLE	V	<input type="checkbox"/> DELETE
NAME	APPLE, KENNETH	
STREET ADDRESS	1806 38TH AVE E	
CITY-ST-ZIP	BRADENTON FL 34208	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Divisional Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Robert Weldon	
1.3 STREET ADDRESS	1806 38th Ave. East	
1.4 CITY-ST-ZIP	Bradenton FL 34208	
2.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP	Bradenton FL 34208	
3.1 TITLE	Divisional Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Peggy Colburn	
3.3 STREET ADDRESS	1806 38th Ave. E.	
3.4 CITY-ST-ZIP	Bradenton, FL 34208	
4.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP	Bradenton FL 34208	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ SIGNATURE REQUIRED

Date **1/12/98** Daytime Phone # **0459886**

CR2E034 (10/97)