

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 13, 2008 8:00 am
Secretary of State

05-13-2008 90014 039 ***150.00

DOCUMENT # G44745

1. Entity 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



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2300898**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E034 (10/07)

6. Name and Address of Current Registered Agent

WALTERS, CLIFFORD L
802 11TH ST WEST
BRADENTON FL 34205

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable.

(If NOT Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2008 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

| | | |
|----------------|--------------------|---------------------------------|
| TITLE | DST | <input type="checkbox"/> Delete |
| NAME | KNOPIK, STEPHEN M | |
| STREET ADDRESS | 1806 38TH AVE E | |
| CITY- ST- ZIP | BRADENTON FL 34208 | |
| TITLE | V | <input type="checkbox"/> Delete |
| NAME | COLLINS, CHRIS | |
| STREET ADDRESS | 1806 38TH AVE E | |
| CITY- ST- ZIP | BRADENTON FL 34208 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | BEALL, R.M. II | |
| STREET ADDRESS | 1806 38TH AVE E | |
| CITY- ST- ZIP | BRADENTON FL 34208 | |
| TITLE | V | <input type="checkbox"/> Delete |
| NAME | HARMON, LEE | |
| STREET ADDRESS | 1806 38TH AVE E | |
| CITY- ST- ZIP | BRADENTON FL 34208 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY- ST- ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY- ST- ZIP | | |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------|---------------------|------------------------------------------------------------------------------|
| TITLE | P | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | SZYMANSKI, Conrad | |
| STREET ADDRESS | 1806 38TH AVE E | |
| CITY- ST- ZIP | Bradenton, FL 34208 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY- ST- ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY- ST- ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY- ST- ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY- ST- ZIP | | |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Michael Maddaloni

Michael Maddaloni

04/15/08

(941) 744-4309

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Beall's Outlet

644745

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