

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H01266

Entity Name: BETA OF ALACHUA, INC.

FILED  
Sep 18, 2009  
Secretary of State

## Current Principal Place of Business:

120 SERENATA SOUTH  
UNIT 314  
PONTE VEDRA, FL 32082

## New Principal Place of Business:

3 INDIAN MOUND DRIVE  
ST. AUGUSTINE, FL 32084

## Current Mailing Address:

120 SERENATA SOUTH  
UNIT 314  
PONTE VEDRA, FL 32082

## New Mailing Address:

3 INDIAN MOUND DRIVE  
ST. AUGUSTINE, FL 32084

FEI Number: 59-2431132

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIRES, CHARLES  
120 SERANATA SOUTH  
UNIT 314  
PONTE VEDRA, FL 32082 US

## Name and Address of New Registered Agent:

STEWART, WILLIAM  
14818 NW 140TH STREET  
ALACHUA, FL 32615 US

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: WILLIAM STEWART

09/18/2009

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: D ( ) Delete  
Name: SPIRES, JONI  
Address: 120 SERENATA SOUTH UNIT 314  
City-St-Zip: PONTE VEDRA, FL 32082

Title: P (X) Delete  
Name: SPIRES, CHARLES  
Address: 120 SERENATA SOUTH UNIT 314  
City-St-Zip: PONTE VEDRA, FL 32082

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: SPIRES, JONI  
Address: 3 INDIAN MOUND DRIVE  
City-St-Zip: ST. AUGUSTINE, FL 32084 US

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: JONI SPIRES

D

09/18/2009

Electronic Signature of Signing Officer or Director

Date