




**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 25, 2006 08:00 AM
Secretary of State

DOCUMENT # J85411 1. Entity Name BEATON & COMPANY INTERNATIONAL, INC.			
Principal Place of Business 3030 BAYSHORE RD. SARASOTA, FL 34234 US		Mailing Address 3030 BYSHORE RD SARASOTA, FL 34234 US	
DO NOT WRITE IN THIS SPACE			
		01222006 No Chg-P CR2E034 (11/05)	
		4. FEI Number 65-0009903	Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BEATON, JOY 3030 BAYSHORE RD. SARASOTA, FL 34234		DO NOT WRITE IN THIS SPACE	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE	PTS		
NAME	BEATON, JOY		
STREET ADDRESS	3030 BAYSHORE RD.		
CITY-ST-ZIP	SARASOTA, FL		
TITLE	V		
NAME	BEATON, PATRICIA A.		
STREET ADDRESS	2708 60TH AVENUE, PLAZA SOUTH		
CITY-ST-ZIP	BRADENTON, FL		
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
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 Chapter 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: 		1/23/06 941-359-590	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	