


# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 14, 2003 8:00 am**  
**Secretary of State**

07-14-2003 90264 001 \*\*\*150.00  
07-14-2003 90264 002 \*\*\*400.00

<b>DOCUMENT #</b> L35045	
<b>1. Entity Name</b> B & B RESORTS, INC.	

<b>Principal Place of Business</b> 2038 CHIMNEY SWIFT HOLLOW TALLAHASSEE FL 32312	<b>Mailing Address</b> 2038 CHIMNEY SWIFT HOLLOW TALLAHASSEE FL 32312
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<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



☐ CHECK HERE IF MAKING CHANGES

<b>4. FEI Number</b> 65-0166881		<input type="checkbox"/> Applied For
		<input type="checkbox"/> Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>		<b>\$8.75-Additional Fee Required</b>

<b>6. Name and Address of Current Registered Agent</b>	<b>7. Name and Address of New Registered Agent</b>
BEECKLER, DONALD C. 2038 CHIMNEY SWIFT HOLLOW TALLAHASSEE FL 32312	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** \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) **DATE** \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing** ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
<b>TITLE</b> PD <b>NAME</b> BEECKLER, DONALD C <b>STREET ADDRESS</b> 2038 CHIMNEY SWIFT HOLL <b>CITY-ST-ZIP</b> TALLAHASSEE FL 32312	<input type="checkbox"/> Delete	<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> D <b>NAME</b> SACHS, LOUIS S. <b>STREET ADDRESS</b> 275 E. 201 ST. <b>CITY-ST-ZIP</b> BRONX NY	<input type="checkbox"/> Delete	<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> D <b>NAME</b> CLEMONS, ROY <b>STREET ADDRESS</b> 721 MIRACLE STRIP PKWY <b>CITY-ST-ZIP</b> FT WALTON BEACH FL	<input type="checkbox"/> Delete	<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete	<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete	<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Delete	<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition

**12.** 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 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:** DONALD C. BEECKLER **7/11/03** **850-556-0340**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (4/03)

Attachment

55051255  
L35045

July 7, 2003

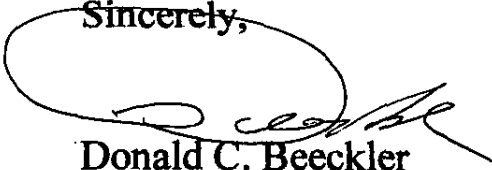
Florida Department of State:

I am sorry that I missed the deadline for the annual corporate filling. I am usually quite diligent about the filling deadline. I don't recall and don't have any record of having received the notice. Specifically, I don't have a previous 2003 notice in my possession.

Therefore, I am asking that the \$400 penalty be waved. The instructions with the filling notice indicate that this request can be made if a letter is sent stating that the notice had not been received in the mail prior to the deadline.

Thank you for your consideration. Enclosed is a self-addressed stamped envelope for returning the \$400 penalty, if approved.

Sincerely,



Donald C. Beeckler  
President of B&B Resorts, Inc.  
2038 Chimney Swift  
Tallahassee, Florida 32312  
850-556-0340