

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2005 08:00 AM
Secretary of State

DOCUMENT # M64375
 1. Entity Name
BEAN CONSTRUCTION INC.



| | |
|---|---|
| Principal Place of Business 224 STATE AVE DAYTONA BEACH, FL 32117 | Mailing Address 224 STATE AVE DAYTONA BEACH, FL 32117 |
|---|---|

DO NOT WRITE IN THIS SPACE



01242005 No Chg-P CR2E034 (10/03)

| | |
|-----------------------------|-------------------------------|
| 4. FEI Number 59-2863155 | Applied For Not Applicable |
|-----------------------------|-------------------------------|

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 REYNOLDS, BRIAN
 224 STATE AVE
 HOLLY HILL, FL 32117

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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 \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P REYNOLDS, BRIAN 224 STATE AVE HOLLY HILL, FL 32117 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T REYNOLDS, K. BRUCE 224 STATE AVE HOLLY HILL, FL 32117 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

1000001247140
 04/09/2005-20016-009 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Brian Reynolds 4/9/05
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #