


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2004 8:00 am
Secretary of State

04-20-2004 90027 018 ****61.25

DOCUMENT # N01000008969

1. Entity Name
THE R.M. BEALL, SR. CHARITABLE OPERATING FOUNDATION, INC.



Principal Place of Business
**1806 38TH AVENUE EAST
 BRADENTON, FL 34208**

Mailing Address
**PO BOX 25207
 BRADENTON, FL 34206-5207**


2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

Zip Country

44056100



04062004 Chg-NP CR2E037 (10/03)

4. FEI Number
59-2851924

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**WALTERS, CLIFFORD L
 802 11TH STREET WEST
 BRADENTON, FL 34208**

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 _____ (NOTE: Registered Agent signature required when reinstating)

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

Filing Fee is \$61.25 Due by May 1, 2004

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	BEALL, RM II	
STREET ADDRESS	1806 38TH AVENUE EAST	
CITY-ST-ZIP	BRADENTON, FL 34208	
TITLE	D	<input type="checkbox"/> Delete
NAME	KNOPIK, STEPHEN M	
STREET ADDRESS	1806 38TH AVENUE EAST	
CITY-ST-ZIP	BRADENTON, FL 34208	
TITLE	D	<input type="checkbox"/> Delete
NAME	BEALL, BEVERLY	
STREET ADDRESS	1806 38TH AVENUE EAST	
CITY-ST-ZIP	BRADENTON, FL 34208	
TITLE	D	<input type="checkbox"/> Delete
NAME	SZYMANSKI, BETTY	
STREET ADDRESS	6501 17TH AVE WEST APT W405	
CITY-ST-ZIP	BRADENTON, FL 34209	
TITLE	D	<input type="checkbox"/> Delete
NAME	WALTERS, CLIFF	
STREET ADDRESS	802 11TH ST WEST	
CITY-ST-ZIP	BRADENTON, FL 34205	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an affidavit with all other like empowered.

SIGNATURE: _____ **4/7/04** _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #