

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2008 08:00 AM
Secretary of State

DOCUMENT # N93000003300

1. Entity Name
BEALL'S PAC, INC.



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

Mailing Address
**P O BOX 25207
BRADENTON, FL 34206-5207 US**



03212008 No Chg-NP

CR2E037 (4/06)

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4. FEI Number
65-0433515

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 ST. WEST
BRADENTON, FL 34205**

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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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	BEALL, ROBERT M II
STREET ADDRESS	1806 38TH AVE. EAST
CITY-ST-ZIP	BRADENTON, FL 34208
TITLE	C
NAME	KNOPIK, STEPHEN
STREET ADDRESS	1806 38TH AVE. EAST
CITY-ST-ZIP	BRADENTON, FL 34208
TITLE	VPVC
NAME	WALTERS, CLIFFORD L
STREET ADDRESS	802 11TH ST. WEST
CITY-ST-ZIP	BRADENTON, FL
TITLE	S
NAME	DOYLE, DAN
STREET ADDRESS	1806 38TH AVENUE EAST
CITY-ST-ZIP	BRADENTON, FL 34208
TITLE	T
NAME	MADDALONI, MICHAEL
STREET ADDRESS	1806 38TH AVENUE EAST
CITY-ST-ZIP	BRADENTON, FL 34208
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000876199
04/11/08-80064-016 61.25

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IN THIS SPACE**

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 617, 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: Michael Maddaloni Treasurer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/08 (941) 744-4309

Date

Daytime Phone #