

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 14, 2002 8:00 am**  
**Secretary of State**

01-14-2002 90055 032 \*\*\*150.00

DOCUMENT # P01000006061

1. Entity Name  
**BEEBE BUILDERS, INC.**

Principal Place of Business Mailing Address  
**18149 PERIGON WAY 18149 PERIGON WAY**  
**JUPITER FL 33458 JUPITER FL 33458**

80001930



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address  
**6661 Maplewood Dr. Suite #9 Same**  
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State  
**Jupiter, FL**

Country Country  
**USA**

Zip Zip  
**33458**

4. FEI Number Applied For  
**65-1075723** Not Applicable

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

6. Name and Address of Current Registered Agent

**BEEBE, CORODON M III**  
**18149 PERIGON WAY**  
**JUPITER FL 33458**

7. Name and Address of New Registered Agent

Name **(Same) Corodon m Beebe III**  
 Street Address (P.O. Box Number is Not Acceptable) **2042-D Keystone Dr.**  
**Jupiter**  
 City **FL** Zip Code **33458**

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.  
 SIGNATURE **Corodon M Beebe III (President)** 1/7/02  
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

## 11. OFFICERS AND DIRECTORS

TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>BEEBE, CORODON M JR</b>	
STREET ADDRESS	<b>18149 PERIGON WAY</b>	
CITY-ST-ZIP	<b>JUPITER FL 33458</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>BEEBE, CORODON M III</b>	
STREET ADDRESS	<b>18149 PERIGON WAY</b>	
CITY-ST-ZIP	<b>JUPITER FL 33458</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<b>Secretary/Treasurer</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Corodon m Beebe Jr.</b>	
STREET ADDRESS	<b>18149 Perigon Way</b>	
CITY-ST-ZIP	<b>Jupiter, FL 33458</b>	
TITLE	<b>President</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Corodon m Beebe III</b>	
STREET ADDRESS	<b>2042-D Keystone Dr.</b>	
CITY-ST-ZIP	<b>Jupiter, FL 33458</b>	
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		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Corodon M Beebe III** 1/7/02 561-379-9580  
 Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (9/01)