

2005 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Apr 14, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P01000027581

1. Entity Name  
BEVERLY REED & ASSOCIATES, INC.



Principal Place of Business

3570 SO. OCEAN BLVD  
#909  
SO. PALM BEACH, FL

Mailing Address

PO BOX 1202  
WEST PALM BEACH, FL 33402-1202



01302005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-1089628	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

REED, BEVERLY L  
3570 SOUTH OCEAN BLVD.  
#909  
SO. PALM BEACH, FL 33480

**DO NOT WRITE  
IN THIS SPACE**

8. I, the undersigned, being the duly authorized officer or director of the corporation, hereby certify that the foregoing is a true and correct copy of the annual report as required by law to be filed in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Beverly L. Reed*

(Initiating)

DATE

4/11/05

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	PVST
NAME	REED, BEVERLY C
STREET ADDRESS	3570 SO. OCEAN BLVD #909
CITY - ST - ZIP	SO. PALM BEACH, FL 33480

TITLE	
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CITY - ST - ZIP	

U00000304757  
04/14/05-80055-021 150.00

**DO NOT WRITE  
IN THIS SPACE**

12.

changed, or on an attachment with an address, with all other like empowered.

i). Florida Statutes. I further certify that the information  
if made under oath, that I am an officer or director  
d that my name appears in Block 10 or Block 11 if

SIGNATURE:

*Beverly L. Reed* BEVERLY L. REED  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PRESIDENT

Date

Daytime Phone #

4/11/05 (561) 547-8780