2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 13, 2006 8:00 am Secretary of State

DOCUMENT # P01000093326 1. Entity Name BEACH DESIGN & CONSULTING, INC.					02-13-2006 90029 021 ***150.00				
Principal Place of Business 5399 E HWY 30-A #C-107 SANTA ROSA, FL 32459		Mailing Address 5399 E HWY 30-A #C-107 SANTA ROSA, FL 32459		, 124/125/10	,		P1418 41818 811	1821 ti 1881	
2. Principal P	Place of Business	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02032006	Chg-P	CR2E034	(11/05)		
City & State		City & State		4. FEI Numbe 59-375			\rightarrow	plied For Applicable	
Zip	Country	Zip	Coun	ntry		of Status Desired		3.75 Add	itional
	6. Name and Address of Curren	t Registered Agent	·		7. Name and	Address of New R			
, '''' ''				Name					
PRUDHOMME, DONNA 5399 E HWY 30 SANTA ROSA BEACH, FL 32459			Street Address (P.O. Box Number is Not Acceptable)						
	307, 322, 101, 1, 1, 2, 32, 100							7 0 1	
				City	FL Zip Code				
	named entity submits this statement tions of registered agent.	for the purpose of changing its	register	ed office or registe	ered agent, or bot	n, in the State of Flo	orida. I am fam	iliar with,	and accept
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NOT	E: Registere	ed Agent signature require	ed when reinstating)		DATE		
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550	9. Election Campa .00 Trust Fund Con			5.00 May Be Ided to Fees				
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/	CHANGES TO OFF	ICERS AND DI	RECTORS	IN 11
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2. 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 ano 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:

GRATURE AND TYPED OR PRINTED NAME OF SIGNUNG OFFICER OR DIRECTOR

2-5-06

585-1242 Dayture Phone #