

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P01000106819

1. Entity Name
BEAUMONT REALTY AND DEVELOPMENT, INC.



FILED

04 OCT 28 AM 9:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
4072 S.W. BIMINI CIRCLE
PALM CITY, FL 34990

Mailing Address
4072 S.W. BIMINI CIRCLE N.
PALM CITY, FL 34990



2. Principal Place of Business

3. Mailing Address

REINSTATEMENT

00152004 BEIN P 002E098 (6/04)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
65-1153131

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BASS, DONALD L
7166 S.E. OSPREY STREET
HOBE SOUND, FL 33455

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After January 1, 2005, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PS
BEAUMONT, LISA
4072 S.W. BIMINI CIRCLE N.
PALM CITY, FL 34990 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
400042314254
10/29/04--01050--022 **150.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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 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

Lisa Beaumont
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LISA BEAUMONT

10/29/04

Date

775 486-3244

Daytime Phone #

20f2

October 28, 2004

TO: Florida Department of State
FROM: Beaumont Realty and Development, Inc.
Beaumont Enterprises of Martin County

RE: Corporate Renewals

Please note that we did not receive notification of renewal date from our accountant until the end of September when we were in the midst of recovering from Hurricanes Jeanne and Frances.

We are submitting the renewal fees with the late charges waived per our phone call to your office in inquiry regarding proper procedure.

Thank you

A handwritten signature in cursive script that reads "Lisa + Peter Beaumont". The signature is written in dark ink and is positioned above the printed name.

Lisa and Peter Beaumont