2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000028683

1. Entity Name

BETH CALLANS PROPERTY ACCESS CONTROL SERVICES CORPORATION



Principal Place of Business

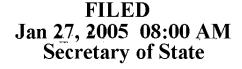
595 BAY ISLES ROAD

SUITE 201 LONGBOAT KEY, FL 34228 Mailing Address

595 BAY ISLES ROAD

SUITE 201

LONGBOAT KEY, FL 34228





DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01122005 No Chg-P CR2E034 (10/03)

4. FEI Number 02-0567637

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

(941)387-3443

Daytime Phone #

6. Name and Address of Current Registered Agent

CALLANS, BETH 595 BAY ISLES ROAD SUITE 201 LONGBOAT KEY, FL 34228

SIGNATURE:

DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the plants of registered agent.	ourpose of changing its register	ed office or re	gistered agent, or bo	h, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title II applicable. (NOTE Registered Agent signature)				equired when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		Election Campaign Final Trust Fund Contribution.	~	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS -					
TITLE NAME STREET ADDRESS CITY+ST-ZIP	D CALLANS, BETH 595 BAY ISLES ROAD #201 LONGBOAT KEY, FL 34228				U00000138457 01/27/05-80053-014 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				. <u></u>	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Fiorida 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.					