

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90393 013 ***150.00

DOCUMENT # P02000077899

1. Entity Name
ROCK-N-BEAL, INC.



Principal Place of Business
**108 EGLIN PKWY SE
FT WALTON BEACH, FL 32548**

Mailing Address
**108 EGLIN PKWY SE
FT WALTON BEACH, FL 32548**

40052011



01252006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0000095	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>

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

6. Name and Address of Current Registered Agent

**ROCKMAN, KEITH L
108 EGLIN PKWY SE
FT WALTON BEACH, FL 32548**

**DO NOT WRITE
IN THIS SPACE**

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 title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	ROCKMAN, KEITH L
STREET ADDRESS	108 EGLIN PKWY SE
CITY - ST - ZIP	FT WALTON BEACH, FL 32548

TITLE	D
NAME	BEAL, JOSEPH S
STREET ADDRESS	108 EGLIN PKWY SE
CITY - ST - ZIP	FT WALTON BEACH, FL 32548

TITLE	
NAME	
STREET ADDRESS	
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CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 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: Keith L. Rockman **4-14-06** **850 862-7900**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #