

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000114501

FILED
Apr 22, 2009
Secretary of State

Entity Name: BEAU DANIEL ARTISTRY AND DESIGN, INC.

Current Principal Place of Business:

10801 REGENT CIRCLE
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

15481 TWIN FIR RD
LAKE OSWEGO, OR 97035

New Mailing Address:

64736 SYLVAN LOOP
BEND, OR 97701

FEI Number: 06-1654543

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NATVIG, CHERYL
10801 REGENT CIRCLE
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NATVIG, TIA
Address: 15481 TWIN FIR RD
City-St-Zip: LAKE OSWEGO, OR 97035

Title: D () Delete
Name: NATVIG, BEAU
Address: 15481 TWIN FIR RD
City-St-Zip: LAKE OSWEGO, OR 97035

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: NATVIG, TIA
Address: 64736 SYLVAN LOOP
City-St-Zip: BEND, OR 97701

Title: D (X) Change () Addition
Name: NATVIG, BEAU
Address: 64736 SYLVAN LOOP
City-St-Zip: BEND, OR 97701

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIA NATVIG

D

04/22/2009

Electronic Signature of Signing Officer or Director

Date