

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000133695

FILED
Apr 27, 2005
Secretary of State

Entity Name: BEAN COUNTERS BOOKKEEPING, INC.

Current Principal Place of Business:

2442 DUNCAN DRIVE
NICEVILLE, FL 32578 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 5034
NICEVILLE, FL 32578 US

New Mailing Address:

FEI Number: 83-0345231 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VAN BLAIR, KAREN L
2442 DUNCAN DRIVE
NICEVILLE, FL 32578 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: P () Delete
Name: VAN BLAIR, KAREN L
Address: 2442 DUNCAN DRIVE
City-St-Zip: NICEVILLE, FL 32578 US

Title: VP () Delete
Name: VAN BLAIR, RICKY L
Address: 2442 DUNCAN DRIVE
City-St-Zip: NICEVILLE, FL 32578 US

Title: S () Delete
Name: VAN BLAIR, AMANDA L
Address: 2442 DUNCAN DRIVE
City-St-Zip: NICEVILLE, FL 32578 US

Title: T () Delete
Name: VAN BLAIR, JOSHUA J
Address: 2442 DUNCAN DRIVE
City-St-Zip: NICEVILLE, FL 32578 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KAREN L. VAN BLAIR

P

04/27/2005

Electronic Signature of Signing Officer or Director

_____ Date