

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000107508

1. Entity Name
BEULAH LAND BARBEQUE, INC.



Principal Place of Business
**6020 W. NINE MILE ROAD
PENSACOLA, FL 32534**

Mailing Address
**6020 W. NINE MILE ROAD
PENSACOLA, FL 32534**



04252006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0234447

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**DOUGLAS, RONNIE
6020 W 9 MILE RD
PENSACOLA, FL 32526**

**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

Douglas Allen
Signature, typed or printed name of registered agent and title if applicable

Douglas Allen - President
(NOTE: Registered Agent signature required when reinstating)

4/27/06
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**

UN00001555853
05/16/06-80049-014 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ALLEN, DOULAS
STREET ADDRESS	6020 W. NINE MILE ROAD
CITY-ST-ZIP	PENSACOLA, FL 32534
TITLE	T
NAME	ALLEN, SHELA
STREET ADDRESS	6020 W. NINE MILE ROAD
CITY-ST-ZIP	PENSACOLA, FL 32534
TITLE	S
NAME	ALLEN, SHANNON
STREET ADDRESS	6020 W. NINE MILE ROAD
CITY-ST-ZIP	PENSACOLA, FL 32534
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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:

Douglas Allen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/06 *(850) 941-2933*
Date Daytime Phone #