2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000121247

1. Entity Name
GERALD BEECHLER CARPENTRY CO

FILED Apr 30, 2007 08:00 A Secretary of State

Principal Place of Business

3010 TAMARIND DR EDGEWATER, FL 32141 Mailing Address

3010 TAMARIND DR EDGEWATER, FL 32141



DO NOT WRITE IN THIS SPACE	04262007	No Chg-P	CR2E034 (11/05)
DO NOT MKITE IN THIS SPACE	4. FEI Number	,	I A

4. FEI Number Applied For Not Applied For Not Applicable

5. Certificate of Status Desired Status Desired Fee Required

6. Name and Address of Current Registered Agent

BEECHLER, GERALD 3010 TAMARIND DR EDGEWATER, FL, FL 32141

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			d Agent signatur	e required when reinstating)	DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Finan Trust Fund Contribution.	icing	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS		······································			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BEECHLER, GERALD 3010 TAMARIND DR EDGEWATER, FL 32141				Hooppatt 40404		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					U00000742431 05/15/07-80063-013 150.00		
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TITLE NAME STREET ADDRESS CITY-ST-7IP							

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-07 386-689-5640

Daytime Pho