


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 18, 2008 8:00 am**  
**Secretary of State**

02-15-2008 90012 018 \*\*\*150.00

2/

<b>DOCUMENT # P03000121303</b> 1. Entry Name <b>BEAM CONSTRUCTION AND DESIGN, INC.</b>					
Principal Place of Business <b>197 WOODVILLE HIGHWAY CRAWFORDVILLE FL 32327 US</b>			Mailing Address <b>197 WOODVILLE HIGHWAY CRAWFORDVILLE FL 32327 US</b>		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>56-2412766</b> <div style="float: right;"> <input type="checkbox"/> Applied For  <input type="checkbox"/> Not Applicable         </div>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				1st MOORE CR2E034 (10/07)	
6. Name and Address of Current Registered Agent <b>BEAM, TED R 197 WOODVILLE HIGHWAY CRAWFORDVILLE FL 32327</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
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 <u><i>Ted R. Beam</i></u> <span style="float: right;">3-12-08</span> <small>Signature, typed or printed name of registered agent and date of filing</small> <span style="float: right;"><small>NOTE: Registered Agent signature required when converting</small></span> <span style="float: right;"><small>DATE</small></span>					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2008 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>			9. Election Campaign Financing <b>\$5.00 May Be Added to Fees</b> Trust Fund Contribution <input type="checkbox"/>		
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	P.D BEAM, TED R 197 WOODVILLE HIGHWAY CRAWFORDVILLE FL 32327		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VP, D BEAM, JASON W 197 WOODVILLE HIGHWAY CRAWFORDVILLE FL 32327		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	S, TD BEAM, ERICK 197 WOODVILLE HIGHWAY CRAWFORDVILLE FL 32327		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<div style="text-align: right;"><input type="checkbox"/> Delete</div>		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<div style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</div>	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: <u><i>Ted R. Beam</i></u> <span style="float: right;">3-12-08</span> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> <span style="float: right;"><small>DATE</small></span>					