2004 FOR PROFIT CORPORATION ANNUAL REPORT

-ANNUAL REPORT							SEco	FILE)	
DOCUMENT # P03000131979 1. Entity Name						SECRETARY OF STATE DIVISION OF CORPORATIONS				
BEAL'S LANDSCAPING & NURSERY, INC.							04 JAI	V 13 AF	1 8: 0	0
Principal Place of Business 2800 HWY 98 W MARY ESTER, FL 32569			Mailing Address 2800 HWY 98 W MARY ESTER, FL 32569							
2. Principal Place of Business			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.		01142004	Chg-P	CR2E034	(10/03)	MRI	
City & State			City & State			4. FEI Number				opfied For ot Applicable
Zip	Country		Zip	Coun	itry	5. Certificate of		□ Fe	B.75 Add ee Require	
	6. Name	and Address of Current	Registered Agent		Name	7. Name and A	ddress of New R	egistered Ag	ent	
BEAL, CHRISTOPHER T 2800 HWY 98 W MARY ESTER, FL 32569					Street Address (P.O. Box Number is Not Acceptable)					
					City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
FIL After M	E NOW!!! ay 1, 2004	FEE IS \$150.00 Fee will be \$550.	9. Election Campa Trust Fund Cont		· +	.00 May Be	t ţu	*	Top :	
10.		OFFICERS AND	DIRECTORS	11.		ADDITIONS/C	HANGES TO OFF	CERS AND D	IRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2800 HWY	RISTOPHER T	☐ Delete	TITLI NAM STRE	· 1		THE PROPERTY OF THE PROPERTY O		Change	☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	,		□ Delete		. 1	01/27	00027! /040100	33 81 3005	Change 92 **15(Addition
TITLE NAME STREET ADDRESS CHY-ST-ZIP			☐ Delete				4 - D -		_ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete					. [Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete				***************************************	[_ Change	Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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	RINTED NAME OF SIGNING OFFICER	OR DIDECT	TOP		Data	F		





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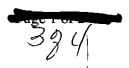
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Document Number

FEI Number	200422257
FEI Number Status	O Applied For O Not Applicable O Current
Certificate of Status Des	sired_O_Yes_O=No\$8.75 each
Pri	ncipal Place of Business
Address	2800 HWY 98 W
Suite, Apt. #, etc.	
City, State	MARY ESTER , FL
Zip Code & Country	**************************************
Address	2800 HWY 98 W
Address	Mailing Address
Suite, Apt. #, etc.	
City, State	MARY ESTER , FL
Zip Code & Country	32569
Name An	nd Address of Registered Agent
Name (Last, First, Middle, Title)	Quierraryeunerrarrarrarrarrarrerrarrarrarrar grandeenrarrarrarrarrarrarrarrarrarrarrar grandeenra generarrar
or-RA Business Name	
Address	2800 HWY 98 W
Suite, Apt. #, etc.	
City, State	MARY ESTER , FL
Zip Code & Country	32569

Agent Signature' block below. RA signature MUST be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its

Registered Agent Signature Kinsleylon T.





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Document Number P03000131979 Business Entity Name BEAL'S LANDSCAPING & NURSERY, INC.

Election Campaign Financing Trust Fund Contribution O Yes

No

Officer/Director Name And Address

Title	D			
Name (Last, First, Middle, Title)	BEAL	CHRISTOPHER	T	
-or- Entity Name			*****	,,,,
Street Address	2800 HWY 98 W	***************************************		99.AV
City, State	MARY ESTER	, FL		
Zip Code & Country	32569	*		
Title	D			
Name (Last, First, Middle, Title)	BEAL	PANDORA	L	· · · · · · · · · · · · · · · · · · ·
-or- Entity Name		*******************************	************	
Street Address	2800 HWY 98 W			
City, State	MARY ESTER	, FL		
Zip Code & Country	32569			
Title	• • • • • • • • • • • • • • • • • • •			
Name (Last, First, Middle, Title)		3	,,,	7.
-or- Entity Name				
Street Address				·
City, State			ene	
Zip Code & Country		~. 		
Title				
Name (Last, First, Middle, Title)		39	, ,	,
-or- Entity Name	3	***************************************		set.
Street Address			**********	