

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 13, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000137305

1. Entity Name
C. W. BEAN GENERAL CONTRACTOR, INC.



Principal Place of Business

3334 BROADVIEW CIRCLE
CRESTVIEW, FL 32539 US

Mailing Address

POST OFFICE BOX 88
NICEVILLE, FL 32588 US

DO NOT WRITE IN THIS SPACE



05102005 No Chg-P CR2E034 (10/03)

4. FEI Number
36-4543984

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

BEAN, C. W JR.
3334 BROADVIEW CIRCLE
CRESTVIEW, FL 32539

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE P
NAME BEAN, C. W JR.
STREET ADDRESS 3334 BROADVIEW CIRCLE
CITY-ST-ZIP CRESTVIEW, FL 32539

TITLE VP
NAME MELVILLE, JEREMIAH
STREET ADDRESS 3334 BROADVIEW CIRCLE
CITY-ST-ZIP CRESTVIEW, FL 32536

TITLE S/T
NAME MELVILLE, ISAIAH
STREET ADDRESS 3334 BROADVIEW CIRCLE
CITY-ST-ZIP CRESTVIEW, FL 32536

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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05/13/05-80008-005 150.00

**DO NOT WRITE
IN THIS SPACE**

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 PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/10/05

Date

850-830-0400

Daytime Phone #