

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 21, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000002464

1. Entity Name
BEER CITY, INC.



Principal Place of Business
**4113 BAMBOO DR
PENSACOLA FL 32526
US**

Mailing Address
**4113 BAMBOO DR
PENSACOLA FL 32526
US**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
90-0132592

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WHITE, DEVRA
4113 BAMBOO DR
PENSACOLA FL 32526**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL 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 _____ (NOTE: Registered Agent signature required when reappointing)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	D	☐ Delete		TITLE		☐ Change ☐ Add	
NAME	WHITE, DAVID M			NAME			
STREET ADDRESS	4113 BAMBOO DR			STREET ADDRESS			
CITY-ST-ZIP	PENSACOLA FL 32526			CITY-ST-ZIP			
TITLE	C,P	☐ Delete		TITLE		☐ Change ☐ Add	
NAME	WHITE, DAVID M			NAME			
STREET ADDRESS	4113 BAMBOO DR			STREET ADDRESS			
CITY-ST-ZIP	PENSACOLA FL 32526			CITY-ST-ZIP			
TITLE	D	☐ Delete		TITLE		☐ Change ☐ Add	
NAME	WHITE, DEVRA			NAME			
STREET ADDRESS	4113 BAMBOO DR			STREET ADDRESS			
CITY-ST-ZIP	PENSACOLA FL 32526			CITY-ST-ZIP			
TITLE	T,S	☐ Delete		TITLE		☐ Change ☐ Add	
NAME	WHITE, DEVRA			NAME			
STREET ADDRESS	4113 BAMBOO DR			STREET ADDRESS			
CITY-ST-ZIP	PENSACOLA FL 32526			CITY-ST-ZIP			
TITLE	D,VP	☐ Delete		TITLE		☐ Change ☐ Add	
NAME	WHITE, MICHAEL S			NAME			
STREET ADDRESS	8151 SPICEWOOD DR			STREET ADDRESS			
CITY-ST-ZIP	PENSACOLA FL 32526			CITY-ST-ZIP			
TITLE		☐ Delete		TITLE		☐ Change ☐ Add	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

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: *Devra K. White* 511 DEVRA K WHITE 850-453-8827