2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000089703

Entity Name: BEACON SOURCE, INC.

FILED Apr 06, 2007 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

4115 MEADE WAY 7691 SE HERITAGE BLVD WEST PALM BEACH, FL 33409 HOBE SOUND, FL 33455

Current Mailing Address: New Mailing Address:

4115 MEADE WAY
WEST PALM BEACH, FL 33409
7691 SE HERITAGE BLVD
HOBE SOUND, FL 33455

FEI Number: 20-3058783 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LLOYD, CORY
4115 MEADE WAY
7691 SE HERITAGE BLVD
WEST PALM BEACH, FL 33409 US
HOBE SOUND, FL 33455 US

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.

SIGNATURE: CORY LLOYD 04/06/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

() Delete Title: DP (X) Change ()

Title: DP () Delete Title: DP (X) Change () Addition
Name: LLOYD, CORY
Address: 4115 MEADE WAY
Address: 7691 SE HERITAGE BLVD

Address: 4115 MEADE WAY Address: 7691 SE HERITAGE BLVD City-St-Zip: WEST PALM BEACH, FL 33409 City-St-Zip: HOBE SOUND, FL 33455

Title: DVP () Delete Title: () Change () Addition

 Name:
 KALLIVAYALIL, SHAWN
 Name:

 Address:
 1100 SW 12TH ST. #310
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33315
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CORY LLOYD DP 04/06/2007