

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000105805

FILED  
Apr 13, 2009  
Secretary of State

**Entity Name:** THE BEAD CHICK, INC./ANCIENT CITY ARTISAN'S GUILD

**Current Principal Place of Business:**

78B SAN MARCO AVENUE  
ST. AUGUSTINE, FL 32084

**New Principal Place of Business:**

**Current Mailing Address:**

78B SAN MARCO AVENUE  
ST. AUGUSTINE, FL 32084

**New Mailing Address:**

**FEI Number:** 20-3221792

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WARD, MARGARET  
235 MONTEREY AVENUE  
ST. AUGUSTINE, FL 32084 US

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

WARD, MARGARET  
1132 COMPASS ROW  
ST. AUGUSTINE, FL 32080 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: MARGARET WARD

04/13/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P,VP ( ) Delete  
Name: WARD, MARGARET  
Address: 235 MONTEREY AVENUE  
City-St-Zip: ST. AUGUSTINE, FL 32084

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P,VP (X) Change ( ) Addition  
Name: WARD, MARGARET  
Address: 1132 COMPASS ROW  
City-St-Zip: ST. AUGUSTINE, FL 32080

I hereby certify that the information supplied with this filing does not qualify 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: MARGARET WARD

P/VP

04/13/2009

Electronic Signature of Signing Officer or Director

Date