2006 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 12, 2006 8:00 am Secretary of State DOCUMENT # P05000140269 1. Entity Name BECKWITH BUILDERS AND LAND INC. 40001161 Principal Place of Business Mailing Address 9507 WESTOVER CLUB CIRCLE 9507 WESTOVER CLUB CIRCLE WINDERMERE, FL 34786 WINDERMERE, FL 34786 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite Apt. #. etc. 01112006 CR2E034 (11/05) City & State City & State Applied For 4. FEI Number 13-4311491 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BASS, JESSE JERRELL Street Address (P.O. Box Number is Not Acceptable) 9507 WESTOVER CLUB CIRCLE WINDERMERE, FL 34786 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 FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be 9. Election Campaign Financing Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Delete ☐ Change ☐ Addition TITLE TITLE BASS, JESSE JERRELL NAME 9507 WESTOVER CLUB CIRCLE STREET ADDRESS STREET ADDRESS WINDERMERE, FL 34786 CITY-ST-ZIP CITY-ST-ZIP TITLE VP ☐ Delete ☐ Change ☐ Addition BASS, CHERI CROCKETT NAME NAME 9507 WESTOVER CLUB CIRCLE STREET ADDRESS STREET ADDRESS WINDERMERE, FL 34786 CITY-ST-ZP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

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CITY-ST-ZIP

SIGNATURE: