2008 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # P05000155652 1. Entity Name BEAL COMMUNICATIONS, INC. Principal Place of Business Mailing Address 13700 COUNTY ROAD 25 P O BOX 131 EAST LAKE WEIR, FL 32133 EAST LAKE WEIR, FL 32133

FILED Jan 09, 2008 08:00 A Secretary of State



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CR2E034 (11/05) 01082008 No Chg-P

Applied For 4. FEI Number 68-0620068 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

BEAL, RONALD L **13700 COUNTY ROAD 25**

DO NOT WRITE

EAST LAKE WEIR, FL 32133		IN THIS SPACE			
 The above named entity submits this statement for the p the obligations of registered agent. 	ourpose of changing its registered office o	r registered agent, or bo	th, in the State of Florida. I am familiar with, and accept		
SIGNATURE Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registered Agent signal	gent signature required when reinstating) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	U00000776509 01/09/08-80026-024 150.00		
TITLE NAME BEAL, RONALD L STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	CTORS	DO NOT WRITE IN THIS SPACE			
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP					

12. I hereby certify that the information supplied with this filling 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.

SIGNATURE: