

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000058278

FILED  
Feb 25, 2009  
Secretary of State

Entity Name: BECK ENTERPRISES OF SW FL INC

**Current Principal Place of Business:**

8625 EVERGREEN LN.  
ST. JAMES CITY, FL 33956

**New Principal Place of Business:**

**Current Mailing Address:**

8625 EVERGREEN LN.  
ST. JAMES CITY, FL 33956

**New Mailing Address:**

FEI Number: 26-2698101      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

SWAN, LAWRENCE  
709 CAPE CORAL PARKWAY WEST  
CAPE CORAL, FL 33914      US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BAKER, EUGENE W  
Address: 826 EVERGREEN LN  
City-St-Zip: ST.JAMES CITY, FL 33956

Title: VPST ( ) Delete  
Name: BAKER, KAREY  
Address: 826 EVERGREEN LN  
City-St-Zip: ST.JAMES CITY, FL 33956

Title: D ( ) Delete  
Name: BAKER, KAREY  
Address: 826 EVERGREEN LN  
City-St-Zip: ST. JAMES CITY, FL 33956

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: EUGENE W. BAKER

PD

02/25/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date