

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000109087

Entity Name: BEANTOWN AMELIA, INC.

FILED
May 08, 2009
Secretary of State

Current Principal Place of Business:

305 BONNIEVIEW RD.
FERNANDINA BEACH, FL 32034

New Principal Place of Business:

6 NORTH FLETCHER AVENUE
FERNANDINA BEACH, FL 32034

Current Mailing Address:

305 BONNIEVIEW RD.
FERNANDINA BEACH, FL 32034

New Mailing Address:

FEI Number: 26-3893889 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BEAN, ABBY
305 BONNIEVIEW RD.
FERNANDINA BEACH, FL 32034 US

Name and Address of New Registered Agent:

BEAN, ABBY PRES
305 BONNIEVIEW RD.
FERNANDINA BEACH, FL 32034 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: ABIGAIL B. BEAN

05/08/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BEAN, ABBY
Address: 305 BONNIEVIEW RD.
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: VP () Delete
Name: BEAN, AARON
Address: 305 BONNIEVIEW RD.
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: S/T () Delete
Name: BEAN, ABBY
Address: 305 BONNIEVIEW RD.
City-St-Zip: FERNANDINA BEACH, FL 32034

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: ABIGAIL B. BEAN

P

05/08/2009

Electronic Signature of Signing Officer or Director

Date