2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # P14852

1. Entity Name
HIGHBEACH, INC.

Principal Place of Business	Mailing Address
115 FRANCIN ST BANGOR, ME 04402-0702 US	1000 MARKET ST BLDG 1 PORTSMOUTH, NH 03801 US

01232006 No Chg-P CR2E034 (11/05)

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4. FEI Number
01-0428078
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	WALSH, MICHAEL P.
STREET ADDRESS	1001 E ATLANTIC AVE
CITY-ST-ZIP	DELRAY BEACH, FL 33483
TITLE	S
NAME	NEEDHAM, THOMAS E..
STREET ADDRESS	1001 E ATLANTIC AVE
CITY-ST-ZIP	DELRAY BEACH, FL 33483
TITLE	TD
NAME	WALSH, MARK T.
STREET ADDRESS	1001 E ATLANTIC AVE
CITY-ST-ZIP	DELRAY BEACH, FL 33483
TITLE	VD
NAME	WALSH, WILLIAM J.
STREET ADDRESS	1000 MARKET ST STE 300
CITY-ST-ZIP	PORTSMOUTH, NH 03801
TITLE	D
NAME	WALSH, THOMAS T.
STREET ADDRESS	1000 MARKET ST STE 300
CITY-ST-ZIP	PORTSMOUTH, NH 03801
TITLE	V
NAME	LANIGAN, SUZANNE
STREET ADDRESS	1000 MARKET ST BLDG 1
CITY-ST-ZIP	PORTSMOUTH, NH 03801

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03/21/06 80107 007 150.00

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12. 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.

SIGNATURE: Michael Walsh Michael Walsh, Pres. 1/26/06 561 279-9902
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #