


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2008 8:00 am
Secretary of State

03-14-2008 90027 005 ***150.00

DOCUMENT # P25868			
1. Entity Name BEECH STREET CORPORATION			
Principal Place of Business 25500 COMMERANTIE DR LAKE FOREST, CA 92630		Mailing Address 77 SOUTH BEDFORD ST. #200 BURLINGTON, MA 01803	
2. Principal Place of Business - No P.O. Box # 535 E. Diehl Rd		3. Mailing Address Suite, Apt. #, etc. #100	
City & State Naperville IL		City & State Country	
Zip 60563	Country	Zip Country	Country
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FITZGIBBON, SHAWN N 304 PARK AVE. S. 11TH FL NEW YORK, NY 10010 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD THOMPSON, ELEANOR 5080 SPECTRUM DR 1200 W TOWER ADDISON, TX 75001 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T REDMOND, JANICE L 2500 COMMERANTIEDR LAKE FOREST, CA 92630 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

\$150 -

40045172



01082008 Chg-P CR2E034 (12/06)

4. FEI Number
95-3778850

Applied For
Not Applicable

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

**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

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	FITZGIBBON, SHAWN N	
STREET ADDRESS	304 PARK AVE. S. 11TH FL	
CITY-ST-ZIP	NEW YORK, NY 10010	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	THOMPSON, ELEANOR	
STREET ADDRESS	5080 SPECTRUM DR 1200 W TOWER	
CITY-ST-ZIP	ADDISON, TX 75001	
TITLE	T	<input type="checkbox"/> Delete
NAME	REDMOND, JANICE L	
STREET ADDRESS	2500 COMMERANTIEDR	
CITY-ST-ZIP	LAKE FOREST, CA 92630	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Bryan Adel	
STREET ADDRESS	535 E. Diehl Rd #100	
CITY-ST-ZIP	Naperville IL 60563	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Thomas J. Bartlett	
STREET ADDRESS	535 E. Diehl Rd #100	
CITY-ST-ZIP	Naperville IL 60563	
TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	STEVEN A. FLACK	
STREET ADDRESS	535 E. Diehl Rd #100	
CITY-ST-ZIP	Naperville IL 60563	
TITLE	Asst Corp Sec	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GARY CHADEKEL	
STREET ADDRESS	77 So. Bedford St. #200	
CITY-ST-ZIP	Burlington MA 01803	

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GARY CHADEKEL

3-29-08

781 906 6381

Date

Daytime Phone #