2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P94000050466

1. Entity Name

BECKS MOBILE HOME PARK, INC.



Principal Place of Business

125 NORTH RIDGEWOOD AVENUE DAYTONA BEACH, FL 32115

Mailing Address

125 NORTH RIDGEWOOD AVENUE DAYTONA BEACH, FL 32115





04182007

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3259682

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BECKS, BERRIEN H. SR. 125 N. RIDGEWOOD AVENUE DAYTONA BEACH, FL 32114

SIGNATURE:

DO NOT WRITE

4/19/07

Date

386 252 2000

Davtime Phone #

the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered			Agent signature	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					· · · · · · · · · · · · · · · · · · ·
TITLE NAME STREET ADDRESS CITY+ST-ZIP	PD BECKS, BERRIEN H. JR. 125 N. RIDGEWOOD AVENUE DAYTONA BEACH, FL				U00000713432
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD SCHNEBLY, CONNIE SUE 125 N. RIDGEWOOD AVENUE DAYTONA BEACH, FL				// 105/01/07-80065-005/150-00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD BECKS, JENNIFER COLLE 125 N. RIDGEWOOD AVENUE DAYTONA BEACH, FL			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BECKS, MICHAEL 125 N RIDGEWOOD AVE. DAYTONA BEACH, FL 32114				THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					Charpentales (1996)
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.					

Berrien H Becks Jr

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR