

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90526 032 ***150.00

DOCUMENT # P97000020121 1. Entity Name BECKMAN PAVING, INC.					
Principal Place of Business 1025 6TH ST. DAYTONA BEACH, FL 32117 US			Mailing Address P.O. BOX 251103 DAYTONA BEACH, FL 32125		
2. Principal Place of Business 538 Brentwood Dr. Suite, Apt. #, etc.		3. Mailing Address P.O. Box 251103 Suite, Apt. #, etc.			
City & State Daytona Beach, FL Zip 32117		City & State Daytona beach, FL Zip 32125		4. FEI Number 59-3441505	
Country USA		Country USA		Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent BECKMAN, RICHARD 1025 6TH STREET DAYTONA BEACH, FL 32117				7. Name and Address of New Registered Agent Name Richard Beckman Street Address (P.O. Box Number is Not Acceptable) 538 Brentwood Dr. City Daytona Beach FL Zip Code 32125	
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 R.C. Beckman, Pres. 4/29/05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 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 BECKMAN, RICHARD C <input type="checkbox"/> Delete 1025 6TH STREET DAYTONA BEACH, FL 32117		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 538 Brentwood Dr. Daytona Beach, FL 32107	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STDV BECKMAN, MARY S <input type="checkbox"/> Delete 1025 6TH STREET DAYTONA BEACH, FL 32117		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 538 Brentwood Dr. Daytona Beach, FL 32117	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input 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 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 type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Shannon Beckman 4/29/05 (386)252-1519 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					