2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2005
Secretary of State

DOCUMENT# P97000087990

Entity Name: BE PROPERTIES, INC.

Current Principal Place of Business:

P.O. BOX 757
MT. DORA, FL 32757

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 757
MT. DORA, FL 32757

New Mailing Address:

FEI Number: 65-0788185 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAVARGNA, CARRIE
401 EAST OSCEOLA ST
STUART, FL 34990 US

Name and Address of New Registered Agent:

TABOR, WILLIAM E JR
30941 SUNEAGLE DRIVE
MT. DORA, FL 32757 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: WILLIAM E. TABOR, JR. 03/15/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete
Name: BANNON, BARBARA
Address: 1741 EDGEWATER DRIVE
City-St-Zip: MT. DORA, FL 32757

Title: VS ( ) Delete
Name: BANNON, BABARA
Address: 1707 STETSON COURT
City-St-Zip: LONGWOOD, FL 32779

Title: D ( ) Delete
Name: BANNON, GEORGE
Address: BOX 757
City-St-Zip: MT. DORA, FL 32757

Title: D ( ) Delete
Name: EATMAN, ROGER
Address: 2878 KILKIERANE DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

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:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BARBARA BANNON PTD 03/15/2005
Electronic Signature of Signing Officer or Director Date