

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000087990

FILED
Apr 04, 2003
Secretary of State

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
3415 S.W. CORNELL AVE.
PALM CITY, FL 34991 US

Name and Address of New Registered Agent:

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:

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: LAVARGNA, CARRIE
Address: 9250 S.W. 83 STREET
City-St-Zip: MIAMI, FL 33173

Title: D () Delete
Name: BANNON, GEORGE
Address: 1741 EDGEWATER ST.
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

04/04/2003

Electronic Signature of Signing Officer or Director

Date