

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 267087

FILED  
Apr 26, 2007  
Secretary of State

Entity Name: THE BEACHCOMBERS INTERNATIONAL, INC.

## Current Principal Place of Business:

18301 N TAMIAMI TRAIL  
P O BOX 250  
FT MYERS, FL 33902

## New Principal Place of Business:

18301 N TAMIAMI TRAIL  
NORTH FT MYERS, FL 33903

## Current Mailing Address:

N TAMIAMI TRAIL  
P O BOX 250  
FT MYERS, FL 33902

## New Mailing Address:

P O BOX 250  
FT MYERS, FL 33902

FEI Number: 59-1032784

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHERNIN, HARRY A.  
1206 PLUMOSA DR.  
FORT MYERS, FL 33902 US

## Name and Address of New Registered Agent:

CHERNIN, HARRY A.  
18301 N TAMIAMI TRAIL  
NORTH FORT MYERS, FL 33903 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:

04/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VTD ( ) Delete  
Name: CHERNIN, IRWIN,  
Address: P.O. BOX 250  
City-St-Zip: FORT MYERS, FL 33902

Title: D ( ) Delete  
Name: MORREALE, LESLIE CHE, RNIN  
Address: P.O. BOX 250  
City-St-Zip: FORT MYERS, FL 33902

Title: SD ( ) Delete  
Name: ROMSTADT, NANCY CHER, NIN  
Address: P.O. BOX 250  
City-St-Zip: FORT MYERS, FL 33902

Title: PD ( ) Delete  
Name: CHERNIN, HARRY,  
Address: P.O. BOX 250  
City-St-Zip: FORT MYERS, FL 33902

Title: D ( ) Delete  
Name: VEREB, ELIZABETH C.,  
Address: P.O. BOX 250  
City-St-Zip: FORT MYERS, FL 33902

## 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:

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: NANCY ROMSTADT

S

04/26/2007

Electronic Signature of Signing Officer or Director

Date