

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



☐ CHECK HERE IF MAKING CHANGES

03

**DOCUMENT # 811027**

1. Entity Name  
**BEACH DALE APARTMENTS INC**



Principal Place of Business  
**700 ANTIOCH AVE  
FT LAUDERDALE FLA 33304-3956**

Mailing Address  
**C.O DAVID E. BUCK, P.A.  
2900 E. OAKLAND PK BLVD #103  
FT. LAUDERDALE FL 33306-1804**

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number **59-6058467**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

~~FARRY, GEORGE~~  
~~700 ANTIOCH AVE #11~~  
~~FT LAUDERDALE, FL 33304~~

**7. Name and Address of New Registered Agent**

Name **DAVID E. BUCK**

Street Address (P.O. Box Number is Not Acceptable)  
**2900 E. OAKLAND PARK BLVD 103**

City **FORT LAUDERDALE FL** Zip Code **33306-1820**

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. **DAVID E. BUCK**

SIGNATURE **DAVID E. BUCK** **REGISTERED AGENT** **9/2/2003**

(NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	<b>S</b>	<input type="checkbox"/> Delete
NAME	<b>TROUT, DALE W</b>	
STREET ADDRESS	<b>700 ANTIOCH # 5</b>	
CITY-ST-ZIP	<b>FT LAUDERDALE, FL 33304</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>HILLS, HEATHER</b>	
STREET ADDRESS	<b>700 ANTIOCH #17</b>	
CITY-ST-ZIP	<b>FORT LAUDERDALE FL 33304</b>	
TITLE	<b>P</b>	<input type="checkbox"/> Delete
NAME	<b>BIRD, J. KENT</b>	
STREET ADDRESS	<b>700 ANTIOCH AVE, #14</b>	
CITY-ST-ZIP	<b>FT LAUDERDALE, FL 33304</b>	
TITLE	<b>T</b>	<input type="checkbox"/> Delete
NAME	<b>FARRY, GEORGE</b>	
STREET ADDRESS	<b>700 ANTIOCH AVENUE, APT 11</b>	
CITY-ST-ZIP	<b>FT. LAUDERDALE FL</b>	
TITLE	<b>VP</b>	<input type="checkbox"/> Delete
NAME	<b>CARTER, WILBER (</b>	
STREET ADDRESS	<b>700 ANTIOCH AVE, #9</b>	
CITY-ST-ZIP	<b>FT. LAUDERDALE FL 33304</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>D'AREZZO, RICHARD</b>	
STREET ADDRESS	<b>700 ANTIOCH AVE #6</b>	
CITY-ST-ZIP	<b>FORT LAUDERDALE FL 33304</b>	

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	<b>5000233624</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>09/26/03-01025--023 **150.00</b>	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:** **DAVID E. BUCK** **PRESIDENT** **9/6/03** **954-561-3303**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (4/03)

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BEACH DALE APARTMENTS, INC.  
700 Antioch Avenue  
Fort Lauderdale, FL 33304

September 2, 2003

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

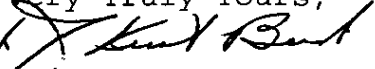
Re: Beach Dale Apartments, Inc. (811027) Annual Report

Dear Sir or Madam,

We have received a second notice from your office requesting that we file an annual report. We have no record of having received a first notice. Therefore, we have enclosed a check payable to the Department of State in the amount of \$150.00, representing the annual fee for 2003 of \$150.00.

Please accept our report and our payment as payment in full as we did not receive your first notice. Thank you for your consideration and cooperation in this matter. Please note the change to the registered agent.

Very Truly Yours,



J. Kent Bird, President