

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 20 PM 1:37

DOCUMENT # H55808

(0)

1. Corporation Name

BEAVER CREEK INVESTMENTS, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business
C/O DONALD E. SCHOLL
620 E TARPON AVE
TARPON SPRINGS FL 34689
US

Mailing Address
C/O DONALD E. SCHOLL
620 E TARPON AVE
TARPON SPRINGS FL 34689
US

3. Date Incorporated or Qualified
05/07/1985

3a. Date of Last Report
02/11/1994

2. Principal Place of Business
21

2a. Mailing Address
26

4. FEI Number
59-6819181

Applied For
Not Applicable

Suite, Apt. #, etc.
22

Suite, Apt. #, etc.
27

5. Certificate of Status Desired
\$6.75 Additional Fee Required

City & State
23

City & State
28

6. Election Campaign Financing
Trust Fund Contribution
\$5.00 May Be Added to Fees

Zip
24

Country
25

Zip
29

Country
30

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes
Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SCHOLL, DONALD E.
620 E TARPON AVE
TARPON SPRINGS FL 34689

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature, typed or printed name of registered agent and fee if applicable)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PST
SCHOLL, DONALD E.
620 E TARPON AVE
TARPON SPRINGS FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
V
RIGG, CHARLES W.
620 E TARPON AVE
TARPON SPRINGS FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
Change Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP
Change Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 a shareholder or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of this report on an individual with an address.

SIGNATURE:

Donald E. Scholl

Donald E. Scholl/President 1/16/95 813-937-3111

PRINT NAME AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature