

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 5:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L48766** (4)

1. Corporation Name
ROBERT C. BEACH, INC.

Principal Place of Business Mailing Address
% ROBERT C. BEACH
100 LEHANE TER. APT #5 4800 S.E. FEDERAL HWY 100 LEHANE TER. APT #5
N. PALM BEACH FL 33408 #169 N PALM BEACH FL 33408 SAME
STUART, FL 34997

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/09/1990	3a. Date of Last Report 05/01/1994
4. FEI Number 65-0180633	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under SS 199.032, Florida Statutes. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. 4800 SE. FEDERAL HWY	26. 4800 S.E. FEDERAL HWY
State, Apt. #, etc. 22. #169	State, Apt. #, etc. 27. #169
City & State 23. STUART, FL	City & State 28. STUART, FL
Zip 24. 34997	Zip 29. 34997
Country 25. 	Country 30.

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
BEACH, ROBERT C. 100 LEHANE TER 4800 S.E. FEDERAL HWY #169 APT #5 N PALM BEACH FL 33408 STUART, FL 34997		B1. Name	
		B2. Street Address (P.O. Box Number is Not Acceptable)	
		B3.	
		B4. City	FL B5. Zip Code

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 of Registered Agent or Registered Agent) _____ (Signature of Registered Agent or Registered Agent)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME D BEACH, ROBERT C.	12.2 STREET ADDRESS 100 LEHANE TER, APT #5 4800 S.E. FEDERAL HWY #169	13.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.3 CITY, ST, ZIP N PALM BEACH FL STUART, FL 34997		13.2 STREET ADDRESS	
12.4 NAME		13.3 CITY, ST, ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.5 STREET ADDRESS		13.4 NAME	
12.6 CITY, ST, ZIP		13.5 STREET ADDRESS	
12.7 NAME		13.6 CITY, ST, ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.8 STREET ADDRESS		13.7 NAME	
12.9 CITY, ST, ZIP		13.8 STREET ADDRESS	
12.10 NAME		13.9 CITY, ST, ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.11 STREET ADDRESS		13.10 NAME	
12.12 CITY, ST, ZIP		13.11 STREET ADDRESS	
12.13 NAME		13.12 CITY, ST, ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
12.14 STREET ADDRESS		13.13 NAME	
12.15 CITY, ST, ZIP		13.14 STREET ADDRESS	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.032, Florida Statutes. I further certify that the information included on this annual report or biennial annual report is true and correct 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 registered agent or registered agent authorized to execute this report as required by Chapter 121, Florida Statutes, and that my name appears in Block 12 of this filing. I understand the filing will be subject to public inspection.

SIGNATURE: *Robert Beach* 4/29/95 (407) 2584604
ROBERT BEACH
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR