FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # **N36255** **(0)**

1. Corporation Name

THE BEACH CLUB CONDOMINIUM ASSOCIATION OF PENSACOLA BEACH, INC.

Principal Place of Business	Mailing Address
C/O REALTY MARTS INT INC 1591 VIA DELUNA DRIVE PENSACOLA BEACH FL 32561 US	C/O REALTY MARTS INTERNATIONAL INC 1591 VIA DELUNA DR PENSACOLA FL 32561 US

3. Date Incorporated or Qualified: 01/18/1990
3a. Date of Last Report: 02/07/1995
4. FEI Number: 59-2993837 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

FADDIS, JOANNE
C/O REALTY MARTS INTERNATIONAL INC
1591 VIA DELUNA DR.
PENSACOLA BCH. FL 32561

10. Name and Address of New Registered Agent

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

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE Joanne Faddis — DATE 2-28-96
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when resigning)

12. OFFICERS AND DIRECTORS

TITLE	DP	☐ DELETE
NAME	MCCAY, BEVERLY	
STREET ADDRESS	18 VIA DELUNA DR.	
CITY-ST-ZIP	PENSACOLA BEACH FL	
TITLE	DV	☐ DELETE
NAME	TAYLOR, DON	
STREET ADDRESS	18 VIA DELUNA DRIVE	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	DS	☐ DELETE
NAME	FADDIS, JOANNE	
STREET ADDRESS	1591 VIA DELUNA DR	
CITY-ST-ZIP	PENSACOLA BEACH FL	
TITLE	DT	☐ DELETE
NAME	PRIMATICO, JOHN	
STREET ADDRESS	18 VIA DELUNA DRIVE	
CITY-ST-ZIP	PENSACOLA BEACH FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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 the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Joanne Faddis/Secretary — Joanne Faddis — Date: 2-28-96 — Daytime Phone #: 904-932-5376
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95)