

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 267087

FILED
Apr 17, 2009
Secretary of State

Entity Name: THE BEACHCOMBERS INTERNATIONAL, INC.

Current Principal Place of Business:

18301 N TAMIAMI TRAIL
NORTH FT MYERS, FL 33903

New Principal Place of Business:

Current Mailing Address:

P O BOX 250
FT MYERS, FL 33902

New Mailing Address:

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.
18301 N TAMIAMI TRAIL
NORTH FORT MYERS, FL 33903 US

Name and Address of New Registered Agent:

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:

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 CHERNIN
Address: P.O. BOX 250
City-St-Zip: FORT MYERS, FL 33902

Title: SD () Delete
Name: ROMSTADT, NANCY CHERNIN
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

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04/17/2009

Electronic Signature of Signing Officer or Director

Date