

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000048325

Entity Name: BEACH CLOSING SERVICES, PA**Current Principal Place of Business:**6702 GULF BLVD.
ST. PETE BEACH, FL 33706**Current Mailing Address:**6702 GULF BLVD.
ST. PETE BEACH, FL 33706**FEI Number:** 20-8893011**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HASTINGS, DAVID C.
2207 54 ST. S.
GULFPORT, FL 33707 US*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**Officer/Director Detail :**

Title	TREASURER
Name	SCHAFFER, MICHAEL
Address	6702 GULF BLVD.
City-State-Zip:	ST. PETE BEACH FL 33706

Title	PRESIDENT
Name	WOOSELY, DONALD
Address	6702 GULF BLVD.
City-State-Zip:	ST. PETE BEACH FL 33706

Title	DIRECTOR
Name	SCHAFFER, MARILYN M
Address	6702 GULF BLVD.
City-State-Zip:	ST. PETE BEACH FL 33706

Title	DIRECTOR
Name	POWELL, JOHN G
Address	6702 GULF BLVD.
City-State-Zip:	ST. PETE BEACH FL 33706

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL SCHAFFER**06/16/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date