Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90136 048 \*\*\*150.00

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

DO DOV 1530

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## **DOCUMENT # G81472**

1. Corporation Name

Principal Place of Business

DO DOV 1520

SEVENTH BEACH PARK DEVELOPMENT, INC.

50 BEAL PARKWAY. SUITE 2 FORT WALTON BEACH FL 32549		50 BEAL PARKWAY. SUITE 2 FORT WALTON BEACH FL 32549				DO NOT WRITE IN THIS SPACE			
, on warren	DENOTITE GEOTO					3. Date Incorporated or Qualifed 01/31/1984			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number		Applied For	
21		26				59-2426140		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certifcate of Status Desired	\$8.75 Additional		
City & State		City & State				6. Election Campaign Financing	\$5.0	00 May Be	
23		28	¬ ´			Trust Fund Contribution Added to Fees			
Zip Country			Zip Country			8. This corporation owes the current year Intangible			
24	25 29 30			Personal Property Tax. Yes No					
	9. Name and Address of Current					10. Name and Address of New Registered Agent			
		<u> </u>		81	Name				
GOU	rley, warren n.			82	Street				
50 B	EAL PARKWAY		82 Street Add		Street	Address (P.O. Box Number is Not Acceptable)			
SUITE 2				83	-				
FOR	r walton beach FL 32548			<u></u>			05 7	ip Code	
				84	City	FL	85 Z	ip Code	
11. Pursuant	to the provisions of Sections 607,0502	and 607,1508, Florida Statu	ites, the a	bove	e-named	corporation submits this statement for the purpose of cl	hanging	its registered	
office or n	agistored agent or both in the State o	f Florida. Such change was a	authorized	I DV	rne como	oration's board of directors. I heraby accept the appoint	ment as	registered	
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Fit	UIIUA SIAI	ules				ł	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOT	E: Registered	Ager	nt signature re	required when reinstating) DATE			
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND	DIREC	TORS IN 12	
TITLE	DP	DELETE	1.1 TI	TLE			Chan	ge Addition	
NAME	GOURLEY, WARREN N.		1.2 N	AME	Ì				
STREET ADDRESS	50 BEAL PKWY., STE. 2		1.3 \$	TREET	TADDRESS			i	
CITY-ST-ZIP	FT. WALTON BEACH FL		140	TY-S	T-ZIP				
TILE		☐ DELETE	2.1 🏗	TLE			Chan	ge Addition	
NAME			2.2 N	AME					
STREET ADDRESS			2.3 \$	TREE	T ADDRESS				
CITY-ST-ZIP			ITY-S	ST-ZIP	-				
TITLE	DELETE 3.17			_			☐ Chan	ge Addition	
NAME			3.2 N	AME					
STREET ADDRESS			3.3 S	TREE	TADDRESS				
CITY-ST-ZIP			3.4.0	ITY-S	ST-ZIP				
TITLE		☐ DELETE	4.1 7	TLE			☐ Chan	ige Addition	
NAME			4.21	IAME					
STREET ADDRESS			4.3 S	TREE	T ADDRESS				
CITY-ST-ZIP			4.40	ITY-S	T-ZIP				
TITLE	V-14	☐ DELETE	5.1 T				Chan	ge 🔲 Addition	
NAME			5.2 N	AME					
STREET ADDRESS			5.3 S	TREE	T ADDRESS				
CITY-ST-ZIP			5.4 C	ITY-S	T-ZIP		_		
TITLE		☐ DELETE	6.1 T	TLE			Chan	ge	
NAME SS	推翻 無為利 如於海		6.2 N	AME					
STREET ADDRESS			6.3 S	TREE	T ADDRESS				
CITY-ST-ZIP	***		6.4 C	my-s	IT-ZIP				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP