SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/08: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

8andra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(5)

BEACON MOTEL OF FORT MYERS BEACH, INC.

Principal Place of Business	1240 ESTERO BLVD.
1240 ESTERO BLVD. FT. MYERS BEACH FL 33931	FT. MYERS BEACH FL 338

FILED Sep 17 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						- I 1884AN BUN DIDA TAKAL NIDA DIDA BIDA DIDA DIDA DIDA DIDA DIDA D		
1240 ESTERO E	BLVD.	12	240 ESTERO BLVD.					
FT. MYERS BE		FI	T. MYERS BEACH FL 33	931		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified			
						12/30/1986		
2. Principal P	lace of Business	2	n. Mailing Address		· · · · · · · · · · · · · · · · · · ·	4. FEI Number Applie	d For	
21		26	1	Corcus	BLVD E	2 65-0031104 Not A	pplicable	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			□ \$8.75 Add		
22			27 SUNE 202			5. Certificate of Status Desired Fee Requi	red	
City & Stat	6		City & State		- 4	6. Election Campaign Financing \$5.00 Ma	ıy Be	
23		28	1		FL	Trust Fund Contribution	ees	
Zip	Count	·	Zip 1 12 6.27	Count		8. This corporation owes or has paid the current year intang		
24	25	29	J	30 4	ce	Personal Properly Tax due June 30. Yes No. Name and Address of New Registered Agent	<u>-</u>	
		ess of Current Regi						
	LING, ARNO			L		DWARD DALLAS		
	ESTERO BLVD.			Ē		ress (P.O. Box Number Is Not Acceptable)		
FT. I	MYE RS B CH. FL 339	31		-	13	274 Sow CARLOS BUD STE 202		
İ								
				E	City	Myers Beach FL 85 Zip Cod 3393	.e	
11 Pureuant	to the provisions of say	tions 607 0502 and 6	807 1508 Florida Statut	es the abov	e-named corpo	pration submits this statement for the purpose of changing its regist	ered	
I office or	registered agent, or bo	h. in the State of Flo	rida. Such change was	authorized:	by the corporati	ion's board of directors. I hereby accept the appointment as regist	ered	
_	am tamiliar with, and ad	oopt the obligations	of, section 607.0505, Fi	iorida Statut	es.	9/4/95		
SIGNATURE	Signature, lyped or printed name	o of registered agent and title	o if applicable. (N	OTE: Registere	Agent signature requ	guired when reinstating) DATE		
12.		FFICERS AND DIR	ECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 12	
TITLE	Р		DELETE	1.1 TITL		Change	Addition	
NAME	DEBONO, GERALD			1.2 NAM	E			
STREET ADDRESS	1240 ESTERO BLV	D		1.3 STRE	ET ADDRESS		1	
CITY-ST-ZIP	FT.MYERS BCH. F			1,4 CiTY	-ST-ZIP			
TITLE			DELETE	2.1 TITLE	:	Change	Addition	
NAME.	•			2.2 NAM	E		- 1	
STREET ADDRESS				2.3 STRE	ET ADDRESS		1	
CITY-ST-ZIP				2.4 CITY				
TITLE			DELETE	3.1 TITL		Change	Addition	
NAME				3.2 NAM				
STREET ADDRESS				1	ET ADDRESS			
CITY-ST-ZIP				3.4 CITY			<u> </u>	
TITLE			DELETE	4.5 TITL		Change	Addition	
NAME				4.2 NAM				
STREET ADDRESS					ET ADDRESS			
CITY-ST-ZIP				4.4 CITY				
TITLE			DELETE	5.1 TITL	1	Change	Addition	
NAME				5.2 NAM				
STREET ADDRESS				1	ET ADDRESS			
CITY-ST-ZIP				5.4 CITY				
TITLE			DELETE	6.1 TITL	i	Change	Addition	
NAME				6.2 NAM	1			
STREET ADDRESS					ET ADDRESS			
CITY-ST-ZIP				6.4 CITY	-ST-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.