**FILED** 

Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90245 010 \*\*\*150.00

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

Mailing Address

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # J59228

Principal Place of Business

BEACH CLUB BROKERS, INC.

1304 SIMONTON ST KEY WEST FL 33040-6546 US		1304 SIMONTON ST KEY WEST FL 33040-6546 US			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  02/25/1987				
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	ĺ	Ap	plied For
21		26				59-2836238		No	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional
22		27				C. Contribute of Clarks Section 2		Fee.Re	quired
City & State		City & State	<b>—</b>			6. Election Campaign Financing			May Be
23		28				Trust Fund Contribution			o Fees
Zip	Country	Zip				8. This corporation owes the current year			□No
24	25		30			Personal Property Tax.	<u>_</u>		Пио
	9. Name and Address of Curr	ent Registered Agent	8	1 6	Name	10. Name and Address of New Register	ea Agen	<u> </u>	
THO	RNBURGH, DAWN		٥	Ή'	vame				
	VIRGINIA ST.		82 Street Ad			ess (P.O. Box Number is Not Acceptable)			
KEY	WEST FL 33040		83	3			-		_
			84	<b>a</b> (	City		2 85	Zip (	Code
							L	l	- 4
office or re agent. I a	egistered agent, or both, in the Sta	502 and 607.1508, Florida Statutes te of Florida. Such change was aut gations of, Section 607.0505, Florid	thorized by	y the	amed corpo e corporation	oration submits this statement for the purpose in's board of directors. I hereby accept the ap	of chang pointmer	jing its it as reg	registered gistered
SIGNATURE	Signature, typed or printed name of registered a	agent and title if applicable. (NOTE: F	Registered Age	ent siç	gnature required	when reinstating) DATE			
12.	OFFICERS	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS			
TITLE	DP	☐ DELETE	1.1 TITLE					Change	☐ Addition
NAME	THORNBURGH, DAWN		1.2 NAME	ŧ					
STREET ADDRESS	916 VIRGINIA ST.		1.3 STREE	ET AD	DRESS				
CITY-ST-ZIP	KEY WEST FL 33040		1.4 CITY-	ST-ZI	P				
TITLE	,	☐ DELETE	2.1 TITLE					Change	☐ Addition
NAME			2.2 NAME			1			
STREET ADDRESS			2.3 STREE	ET AD	ORESS	أأعطيها الأفاد المرايا الأخاي المخيلات يأملك			
CITY-ST-ZIP			2. 4 CITY-	ST-Z	'IP		<u> </u>		
TITLE		☐ DELETE	3.1 TITLE		1			Change	☐ Addition
NAME			3.2 NAME	į					
STREET ADDRESS			3.3 STREI	ET AD	DRESS				
CITY-ST-ZIP			3.4. CITY-	ST-Z	IP II				
TITLE		☐ DELETE	4.1 TITLE					Change	☐ Addition
NAME			4. 2 NAME	E					
STREET ADDRESS			4 3 STREE	ET AD	DRESS				
CITY-ST-ZIP		_	4.4 CITY-	ŞT-ZI	IP				
TITLE		☐ DELETE	5.1 TITLE					Change	Addition
NAME			52 NAME			•			
STREET ADDRESS			5.3 STREI	ET AD	DRESS				
CITY-ST-ZIP			5.4 CITY-	ST-ZI	IP				
TITLE		☐ DELETE	6.1 TITLE					Change	Addition
NAME			6.2 NAME						
ATTICET ABORTON			63 STRE	FTAD	ORESS				

14. I hereby certify that the information supplied with this fling 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 cath; 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 3 if changed or on an attachment with an address, with all other like empowered.

**SIGNATURE** 

CITY-ST-ZIP