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Apr 16 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J85565 (6)

1. Corporation Name
BEACHCOMBERS, INC.

Principal Place of Business
6505 BRANDEMERE ROAD SOUTH
JACKSONVILLE FL 32211
US

Mailing Address
6505 BRANDEMERE RD. SO
JACKSONVILLE FL 32211-5427
US

3. Date Incorporated or Qualified: 07/28/1987
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: 59-2830011 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
GOODWIN, MYRTLELEE
6505 BRANDEMERE ROAD SOUTH
JACKSONVILLE FL 32211

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		Delete	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	Change	Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV GOODWIN, MEGAN E 2641 LORNA ROAD JACKSONVILLE FL	☐	1.1 TITLE DV 1.2 NAME Goodwin, MEGAN E 1.3 STREET ADDRESS 13032 CAldwEll Rd 1.4 CITY-ST-ZIP JACKSONVILLE Fl 32226	☒	☐
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DST GOODWIN, RAY O. 6505 BRANDEMERE ROAD SOUTH JACKSONVILLE FL 32211	☐	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☐	☐
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV GOODWIN, LARRY R. 2641 LORNA RD JACKSONVILLE FL	☐	3.1 TITLE DV 3.2 NAME Goodwin, LARRY R 3.3 STREET ADDRESS 13032 CAldwEll Rd 3.4 CITY-ST-ZIP JACKSONVILLE Fl 32226	☒	☐
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP GOODWIN, MYRTLELEE 6505 BRANDEMERE ROAD SOUTH JACKSONVILLE FL 32211	☐	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐	☐
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV GOODWIN, MICHA 2641 LORNA ROAD JACKSONVILLE FL	☒	5.1 TITLE DV 5.2 NAME MANDY Goodwin 5.3 STREET ADDRESS 13032 CAldwEll Rd. 5.4 CITY-ST-ZIP JACKSONVILLE Fl 32226	☐	☒
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV GOODWIN, JUDITH 2641 LORNA ROAD JACKSONVILLE FL	☐	6.1 TITLE DV 6.2 NAME Goodwin Judith 6.3 STREET ADDRESS 13032 CAldwEll Rd 6.4 CITY-ST-ZIP JACKSONVILLE Fl 32226	☒	☐

CR2E034 (9/96)

14. I do 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.

SIGNATURE: [signature] 4/12/97 (904)...