

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # J97883 (9)

1. Corporation Name

BEACH MANOR, INC.



Principal Place of Business

331 S RIDGEWOOD AVE
DAYTONA BEACH FL 32114
US

Mailing Address

12216 AMBLESIDE DRIVE
POTOMAC MD 20854
US

3. Date Incorporated or Qualified
10/19/1987

3a. Date of Last Report
03/21/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc. 26 9 YELLOW PLUM COURT

22 City & State 27 Suite, Apt. #, etc.

23 Zip 28 Rockville MD

24 Country 25 Country 29 20850 30 USA

4. FEI Number
52-1541105

Applied For
Not Applicable

5. Certificate of Status Desired

\$875 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

10. Name and Address of New Registered Agent

BODDIE, CAROLYN
331 SOUTH RIDGEWOOD AVENUE
DAYTONA BEACH FL 32115

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code
32114

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 the corporation)

(NOTE: Registered Agent signature required when reinstating.)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D PERLMUTTER, SCOTT H.
12216 AMBLESIDE DRIVE
POTOMAS MD

☐ DELETE

1.2 TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

1.3 TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

1.4 TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

1.5 TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

1.6 TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

9 YELLOW PLUM COURT
Rockville MD 20850

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Scott Perlmutter 2/29/96 (202) 678-4077

CR2E034 (12/95)