

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

FILED  
Apr 16 1996 8:00 am  
Secretary of State

DOCUMENT # K06813 (5)

1. Corporation Name

BEACON PROPERTY MANAGEMENT, INC.



Principal Place of Business

Mailing Address

1 N OCEAN BLVD #7  
BOCA RATON FL 33432

1 N OCEAN BLVD #7  
BOCA RATON FL 33432

2. Principal Place of Business

2a. Mailing Address

21 500 NE Spanish River Blvd

25 500 NE Spanish River Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 # 18

27 #18

City & State  
Boca Raton, FL

City & State  
Boca Raton

23 Zip  
33431

Country

28 Zip  
33431

Country

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified  
12/14/1987

3a. Date of Last Report  
04/24/1995

4. FEI Number

65-0018440

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

10. Name and Address of New Registered Agent

WILLIS, ERNEST W.

1 N OCEAN BLVD #7  
BOCA RATON FL 33432

81 Name

Ernest W. Willis

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

Beacon Property Mgmt.

83

500 NE Spanish River Blvd. #18

84 City

Boca Raton

FL

85 Zip Code  
33431

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

*Ernest W. Willis*

ERNEST W. WILLIS

4-10-96

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
PTD	WILLIS, ERNEST W.	590 SILVER LANE	BOCA RATON FL	
VSD	WILLIS, SUNDAY S.	590 SILVER LANE	BOCA RATON FL	
VD	MCKENZIE, JOHN L.	8174 AMBACH WAY	HUPOLUXO FL	
				<input type="checkbox"/> DELETE
				<input type="checkbox"/> DELETE
				<input type="checkbox"/> DELETE
				<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> 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:

*Ernest W. Willis*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ERNEST W. WILLIS 4-10-96 407-750-0040  
Daytime Phone #

CR2E034 (12/95)