

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # K14595

1. Entity Name
BEACH VIDEO, INC.



FILED
Jan 25, 2008 08:00 AM
Secretary of State

Principal Place of Business
3350 E ATLANTIC BLVD
POMPANO BEACH, FL 33062

Mailing Address
3350 E ATLANTIC BLVD
POMPANO BEACH, FL 33062



01192008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0026955

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

COURTY, STEPHANIE S.
3350 EAST ATLANTIC BLVD
POMPANO BEACH, FL 33062

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GARLINGHOUSE, CHARLES 3350 E ATLANTIC BLVD POMPANO BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GARLINGHOUSE, CARY S 3350 E ATLANTIC BLVD POMPANO BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SMITH, GENE W. 3350 E ATLANTIC BLVD POMPANO BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SMITH, IVAN J. 3350 E ATLANTIC BLVD POMPANO BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP COURTY, STEPHANIE S. 3350 E ATLANTIC BLVD POMPANO BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000797924
01/30/08-80009-001 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #