04-09-1999 90023 039 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT	#	OS	1	റ8
4 Compretion Name	•		•	<u> </u>

BEACH E	Boys of Tampa Bay, inc).				s châidhe an maich làche i bit Allia làch		III (
Principal Place	of Rusiness	Mailing Address					4 8 8 8 8 8 8 8	1811 81811 1881
,		4144 PINELAKE LN						
9601 NORWOOD DR. 4144 PINELAKE LN TAMPA FL 33624 #102								
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	TAMPA FL 33624			DO NOT WRITE IN THIS SPACE				
		US			ļ	3. Date Incorporated or Qualifed		
						08/14/1989		
2. Principal Pl	ace of Business	2a. Mailing Address		•	`	4. FEI Number		olied For
21		26				59-2963250		t Applicable
Suite, Apt. i	. #, etc. Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 A	dditional quired		
22		27			A Challes On the Change	· · · · · · · · · · · · · · · · · · ·		
City & State	•	City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 t Added to	
23 Zip	Country	Zip	Country			8. This corporation owes the current y		
Zip	25	29 30	¬ `			Personal Property Tax.		□No
24	9. Name and Address of Curre		<u>' </u>			10. Name and Address of New Regis	tered Agent	
	0. Name and Planton of Carlo		81	Name				
MAG	ers, richard j		-	<u> </u>	4 4-1	(D.O. Day Niverbasia Mat Assentable)		
4144	PINELAKE LN		82	Street	Adares	ss (P.O. Box Number is Not Acceptable)		
#102	2		83	1				
TAM	PA FL 33624		<u> </u>	ļ				
			84	City			FL 85 Zip C	,ode
=11.=Pursuant	to the provisions of Sections 607:05	02 and 607:1508, Florida Statutes;	the abov	e-named	corpor	ration submits this statement for the purp	ose of changing its	registered=
office or re	egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida. Such change was auth	iorized by	tne com	oration	's board of directors. I hereby accept the	appointment as reg	jistered
_	4 /	the state of the s	a Qualitico			4/17	<u> </u>	ļ
SIGNATURE	Signature, typed or printed havine of registered age	ent and title if applicable. (NOTE: Re	gistered Ager	nt signature r	required w	when reinstating)	ATÉ	
12.	OFFICERS A	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE		
TITLE	PVC	☐ DELETÉ	1.1 TITLE		57		☐ Change	Addition
NAME	MAGERS, RICHARD J.		1.2 NAME		MA	GERS, BICHARD J. 4 PINETAKE LN 1#102		
STREET ADDRESS	4144 PINELAKE LN, #102		1.3 STREE	T ADDRESS	414	y pinetake do invo		
CITY-ST-ZIP	TAMPA FL		1.4 CITY-S	T-ZIP	TAN	PA,PL, 33624		
TITLE	ST	DELETE	2.1 TITLE				☐ Change	☐ Addition
NAME	MAGERS, DEBRA A		2.2 NAME					Ì
STREET ADDRESS	4144 PINELAKE LN, #102		2.3 STREE	T ADDRESS				
CITY-ST-ZIP	TAMPA FL	. <u> </u>	.2.4 CITY-	ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE				☐ Change	☐ Addition
NAME			3.2 NAME		1			ļ
STREET ADORESS	-	1	3.3 STREE	T ADDRESS				
CITY-ST-ZIP			3.4. CITY-	ST-ZiP				
πħLE		☐ DELETE	4.1 TITLE				☐ Change	☐ Addition
NAME	,		4. 2 NAME					Į
STREET ADDRESS			4.3 STREE	T ADDRESS				
CITY-ST-ZIP			4.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	5.1 TITLE				☐ Change	Addition
NAMÉ			5.2 NAME					ſ
STREET ADDRESS				T ADDRESS				Ì
CITY-ST-ZIP			5.4 CITY- S	T-ZIP				
TITLE		☐ DELETE	6.1 TITLE				☐ Change	Addition
NAME			6.2 NAME					ļ
STREET ADDRESS		1	6.3 STREE	TADDRESS				

14. I 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, with all other like empowered.

SIGNATURE: