FII	F	NOV	V:	FIL	ING	FEE	<b>AFTER</b>	MAY	1	IS	\$225.	00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

L84958

(2) MANG change Filed 2/27/96

DOCUMENT #

1. Corporation Name \ 1 BEACH BAKEAS, NO. ELLISON 3



	/ /	1821 1441 116		<del> </del>	
rincipal Place of B	Business	Mailing Address		I (#Blif#li ### ifinit eine men	
7820 ARNUGTO	W EXPRESSWAY	P. O. BOX 17902	10		
SUITE 570 JACKSONVICE	•	SARASOTA FL 3427 US	ъ	3. Date Incorporated or Qualified	3a. Date of Last Report
US	rt 32211	••		07/03/1990	03/15/1995
	A Division	_ 2a. Mailing Address	promise and the second	4. FEI Number	Applied For
Principal Place of	S. Holidm D	KINE		65-0077789	Not Applicable
Suite, Apt. #, et		Suite, Apt. #, etc.	,	5. Certificate of Status Desired	\$8.75 Additional Fee Required
255		27		6. Election Campaign Financing	\$5.00 May Be
City & State	who Flounda	Orty & State		Trust Fund Contribution	Added to Fees
SKKK	Solis I Million	28 Zip	Country	8. This corporation has liability for	intangible tax under s 199.032,
グイクス	SE CARACON	29	30		No
<u> </u>	9. Name and Address of Curr			10. Name and Address of New F	fegistered Agent
	7		81 Name	sames ellison	
SALVER,	DAIH		82 Street Ad	dress (P.O. Box Number is Not Acceptat	y drive
	151ST ST		83	820 S. Holida	1 1713
SUITE/10			°   Sui	r 255	To Code
MIAMÍ LA	KKS.FL 33014		84 City <	procesta	FL 85 342 31
• /	\	00 COZ 1500 Florida Sta	butes, the above-named core	poration submits this statement for the public and of directors. I hereby accept the app	rpose of changing its registered offi
Pursuant to the registered	the provisions of Sections 607.05 agent, or both, in the State of FI	502 and 607, 1508, Florida Star Jorida. Such change was autho	rized by the corporation's bo	poration submits this statement for the popularid of directors. I hereby accept the app	pointment as registered agent. Fami
familiar with,	agent, or both, in the state of his and accept the obligations of, Si	ection 607.0505, Florida Statu	tes.	Gllison, Prushdonk	5/28/84
IGNATURE	James Elle	on the Hills is according to the	NOTE Registered Agent's griature red		DATE
	yrafare, typed or printed name of registered at OFFICERS	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12  Change Addition
2. TLE	PD	DELETE	1 1 TITLE	D. Tanes	Griange Addition
AME	ELLISON, JAMES		1.2 NAME	7820 S. Holiday DR	14# 255
TREE1 ADDRESS	4477 WHITE CEDAR TRA	AIL.	1.3 STREET ADDRESS	7830 3. 1101007	4231
HTY-ST-ZIP	SARASOTA FL			NITE A 186 A 7 . 1 - 2 - 1 - 1	Change Addition
ITLE	V > 2	<b>₩</b> .DELETE	2 TITLE	ISTD TO SOL	
IAME	ELLISON ALLEN		22 NAME	Ellison, Isabel 7820 S. Hollday	deins # 255
STREET ADDRESS	4477 WHIDE CEDAR TRA	AIL.		4870 2 House	
CITY-ST-ZIP	SARASOTA FL		2.4 CITY - SI - ZIP		Change Additio
TITLE	s 🔪	<b>₩</b> DELETE	3.1 TITLE 3.2 NAME		•
NAME	ellis <b>o</b> n/Isabel		33 STREET ADDRESS		
STREET ADDRESS	4477 WINTE CEDAR TR	AIL	3 4 CITY - ST - ZIP		
CITY-S1-ZIP	SARASOTA FL	/ DELETE	4.1 TULE		Change Addition
TITLE	MD	- Julian	4 2 NAME		
NAME	MERRILL, DAVID	DECCUAV	4.3 STRSET ADDRESS		
STREET ADDRESS	7820 ARLINGTON FOR	COOMAI	4 4 CITY - ST- ZIP		TO COMPANY
CITY-ST-ZIP	JACKSONVILLE FC	DELETE	5. 1 TITLE		Charige Addition
TITLE		<del></del>	5.2 NAME		
NAME			5.3 STREET ADDRESS	1000019	51941
STREET ADDRESS			5 4 CITY - \$1 - ZIP	1 00001 E 	1018-045 Change C Additi
TITLE	**************************************	DELETE	6 1 TITLE	***225.00	El Orande El Moone
			6.2 NAME		
			6.3 STREET ADDRESS	1	
NAME STREET ADDRESS			63 STREET ADDRESS		

JAMES Ellisad, PRES.