

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000871

FILED
Sep 02, 2005
Secretary of State

Entity Name: SAVE OUR BEACHES, INC.

Current Principal Place of Business:

3474 SCENIC HWY 98 E
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

3474 SCENIC HWY 98 E
DESTIN, FL 32541

New Mailing Address:

FEI Number: 20-0797179 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FEUERSTEIN, LISA J
123 S CALHOUN ST
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BREITHAUP, AL
Address: 3472 SCENIC HWY 98 E
City-St-Zip: DESTIN, FL 32541

Title: VD () Delete
Name: CHERRY, LINDA
Address: 27 N BRONOUGH #4100
City-St-Zip: TALLAHASSEE, FL 32301

Title: STD () Delete
Name: JONES, DENNY
Address: 3474 SCENIC HWY 98 E
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: MOSLEY, VIRGINIA
Address: 3050 SCENIC HWY98
City-St-Zip: DESTIN, FL 32541

Title: PD (X) Change () Addition
Name: CHERRY, LINDA
Address: 27 N BRONOUGH #4100
City-St-Zip: TALLAHASSEE, FL 32301

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DENNY JONES

STD

09/02/2005

Electronic Signature of Signing Officer or Director

Date