2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48770

Entity Name: BEACH YANA, INC.

FILED Mar 21, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 8715 LAIRD ST. PANAMA CITY BEACH, FL 32408 **Current Mailing Address: New Mailing Address:** 8715 LAIRD ST PANAMA CITY BEACH, FL 32408 FEI Number: 59-3128210 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GAMIN, CLAUDIA M 2813 BÁNYAN STREET PANAMA CITY BEACH, FL 32408 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete EVANS, KENNETH J Name: Name: 1314 HARBOUR WAY Address: Address: City-St-Zip: PANAMA CITY BEACH, FL 32407 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: RICE, ROSEMARY Name: HUMBOLDT, BRIAN Address: 5424 HOPETOWN LANE Address: 2350 FOXWORTH DRIVE City-St-Zip: PANAMA CITY BEACH, FL 32408 City-St-Zip: PANAMA CITY, FL 32405 Title: () Delete Title: () Change () Addition MCKINNEY, JIMMY Name: Name: 1024 VINSON ROAD Address: Address: City-St-Zip: SLOCUM, AL 36375 City-St-Zip: Title: () Delete Title: TC (X) Change () Addition Name: GAMIN, CLAUDIA M Name: GAMIN, CLAUDIA M 2813 BANYAN STREET Address: Address: 2813 BANYAN STREET City-St-Zip: PANAMA CITY BEACH, FL 32408 City-St-Zip: PANAMA CITY BEACH, FL 32408 Title: () Delete Title: () Change () Addition BROWN, JERRY Name: Name: 2320 DOROTHY AVENUE Address: Address: PANAMA CITY BEACH, FL 32408 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change () Addition DAVIS, MIKE ROWE, MARVIN Name: Name: Address: 600 ANEMONE ST. Address: 3613 MARINER DRIVE PANAMA CITY BEACH, FL 32413 PANAMA CITY BEACH, FL 32407 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: CLAUDIA M GAMIN TC 03/21/2008