## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # N9400000052 (0)

BEACH DEFENSE FUND, INC.

315 DESOTO ST.

ENEY, DOUGLAS F

317 PALM STREET

HOLLYWOOD FL 33019

HOLLYWOOD FL 33019

Principal Place of Business Mailing Address 315 DESOTO STREET 315 DESOTO STREET							
HOLLYWOOD	FL 33019	HOLLYWOOD FL 33019-4501			Date Incorporated or Qualified     01/06/1994	3s. Date of Last Report 03/28/1996	
2. Principal Place of Business 28. Mailing Address 21			<del></del>	· · · · · · · · · · · · · · · · · · ·	4. FEI Number NOT APPLICABLE	Applied For Not Applicable	
Suite, Ap		Suite, Apt. #, etc.			6. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees		
2ip	25 BROWARD	1==1	SO BK	OWARD		Yes No	
9. Name and Address of Current Registered Agent				Name	10. Name and Address of New Re	gistered Agent	
			81	Neme			
WELSCH, STEVE			87	Street Addr	Idress (P.O. Box Number is Not Acceptable)		
315 DESOTO STREET							
HOLLYWOOD FL 33019			83	<b>5</b>		•	
			84			FL 85 Zip Code	
I office or	nt to the provisions of Sections 617.0502 registered agent, or both, in the State of am familiar with, and accept the obligat	of Florida. Such change was au	nhorized b	v the corporat	poration submits this statement for the p pion's board of directors. I hereby accept	urpose of changing its registered t the appointment as registered	
SIGNATURE	Signature, typed or printed name of registered agent	and title it applicable (NOTE)	Benjetered &	ant sloneture requir	red when reinstaling)	DATE	
12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	☐ DELETE	1.1 TITLE	<del></del>		☐ Change ☐ Addition	
NAMÉ	WELSCH, STEVE		1.2 NAME				
STREET ADDRESS	4.5 050050 05		1.3 STREE	T ADORESS			
CITY - ST - ZIP	HOLLYWOOD FL 33019		1.4 CITY-	· ' '			
TITLE	SVD	DELETE	2.1 TITLE	***************************************		Change Addition	
NAME	NATHANSON, RICHARD		2.2 NAME				

2.3 STREET ADDRESS

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

**6.3 STREET ADDRESS** 

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

8.4. CITY-ST-ZIP

2. 4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

14. If do 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

CITY - ST - ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

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TO CAUCAGE UP TO SENTED MANY OF FRONTING OFFICE OF PRINCESSES

DELETE

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954 923 9/92 Daytime Phone i monaliza

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**FILED** 

Apr 04 1997 8:00am

Secretary of State