

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000327

FILED  
Apr 18, 2011  
Secretary of State

Entity Name: BEACHES HOSPITALITY NETWORK, INC.

## Current Principal Place of Business:

C/O STERLING JOYCE-CASA MARINA HOTEL  
691 NORTH FIRST STREET.  
JACKSONVILLE BEACH, FL 32250 US

## New Principal Place of Business:

C/O WILLIAM BARNETT  
232 BRIARWOOD LANE  
PONTE VEDRA BEACH, FL 32082 US

## Current Mailing Address:

CAROLYN HERMAN, ESQ  
126 SOUTH FIRST ST  
JACKSONVILLE BEACH, FL 32250 US

## New Mailing Address:

C/O WILLIAM BARNETT  
232 BRIARWOOD LANE  
PONTE VEDRA BEACH, FL 32082 US

FEI Number: 59-3358152

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HERMAN, CAROLYN ESQ  
126 SOUTH FIRST ST  
JACKSONVILLE BEACH, FL 32250 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: D  
Name: STERLING, JOYCE  
Address: CASA MARINA HOTEL 691 N FIRST STREET  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D  
Name: MCCAIN, SUNNY  
Address: 2540 WHITE HORSE ROAD EAST  
City-St-Zip: JACKSONVILLE, FL 32246

Title: DPS  
Name: BARNETT, WILLIAM  
Address: 232 BRIARWOOD LANE  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: DT  
Name: SHULER, LEISA  
Address: 120 S. THIRD ST  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: DVP  
Name: NICOLSON, ROB  
Address: 871 OCEAN BLVD  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: D  
Name: BALDWIN, ARLENE  
Address: C/O MARRIOTT COURTYARD 1617 N FIRST ST  
City-St-Zip: JACKSONVILLE BEACH, FL 32250

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM BARNETT

DPS

04/18/2011

Electronic Signature of Signing Officer or Director

Date