

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 14, 2006 8:00 am**  
**Secretary of State**

04-14-2006 90144 015 \*\*\*\*61.25

**DOCUMENT # N99000001616**

1. Entity Name  
**BEACH CARE SERVICES, INC.**



Principal Place of Business  
~~17320 PANAMA CITY BEACH PKWY~~  
~~UNIT 106~~  
~~PANAMA CITY BEACH, FL 32413~~

Mailing Address  
~~P.O. BOX 7481~~  
~~PANAMA CITY BEACH, FL 32413~~



2. Principal Place of Business  
**8317 Front Beach Rd**  
Suite, Apt. #, etc.  
**Suite #31**

3. Mailing Address  
**8317 Front Beach Rd**  
Suite, Apt. #, etc.  
**Suite #31**

04112006 Chg-NP CR2E037 (11/05)

City & State  
**Panama City Beach, FL**  
Zip  
**32408**  
Country  
**USA**

City & State  
**Panama City Beach, FL**  
Zip  
**32408**  
Country  
**USA**

4. FEI Number  
**59-3568025**  
Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**BURKE, MICHAEL S**  
**221 MCKENZIE AVENUE**  
**PANAMA CITY, FL 32401**

**7. Name and Address of New Registered Agent**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City  
**FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25**  
**Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

**Make check payable to**  
**Florida Department of State**

**10. OFFICERS AND DIRECTORS**

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
TRES	BRYSON, BRENDA	C/O COASTAL COMMUNICATIONS	PANAMA CITY BEACH, FL 32413	<input type="checkbox"/>
P	DEMO, PHYLLIS	PO BOX 28774, HV-3 MARRIOTT DR.	BAY POINT, FL 324118774	<input checked="" type="checkbox"/>
S	HARDEGREE, JUDITH	127 SUN LANE	PANAMA CITY BEACH, FL 324135212	<input type="checkbox"/>
VP	BRYAN, RONALD	509 HARRISON AVE	PANAMA CITY, FL 32401	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
PRES	MARIAN GITCHELL	307 SOUTHFIELDS	PANAMA CITY BEACH, FL 32413	<input checked="" type="checkbox"/>
VP	HARDEGREE, JUDITH	127 SUN LANE	PANAMA CITY BEACH, FL 32413	<input checked="" type="checkbox"/>
Secretary	MARGARET STROUD	501 NAUTILUS RD	PANAMA CITY BEACH, FL 32413	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Marian T. Gitchee - MARIAN T. Gitchee**

**April 13, 2006**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #