

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	RPORATI			8	Secretary	TMENT OF STATE of State orporations	TE		7 JA	N 29 PH TARY OF S	TATE	
DOCUMENT # N 99000004992									TALLAH	ASSEE, FL	LOKIDA	
1. Corporation Name BEACH BUILDING OFFICIALS OF FLORIDA												
								400087495474 02/06/0701041004 **420.00				
2. Principa	al Office Addre	ss - No l	P.O. Box #	_	Office Address			\mathbf{L}_{-}			.1.	
		ULF	BLVD.	7047 SUNSET DR.S.			REIN	ISTAT	EME	NTHA		
Suite, Apt. #, etc.				Suite, Apt. #, etc.			4. Date Incorporated or Qualified					
City & State				City & State				To Do Business in Florida 8-20-1999				
REDINGTON SHORES, FL				SOUTH PASADENA, FL				5. FEI Number Applied For				
Zip	3708 PINELLAS			^{Zip} 33707		Country PINELLAS	,	6. CERTIFICATE	OF STATUS DESIRED		onal Fee required	
7. Name and Address of Current Registered Agent												
Name STEVE ANDREWS									The reinstatement fee is imposed, except in			
Street Address (P.O. Box Number is Not Acceptable)								circumstances which the entity did not receive the prior notices. By checking this box, you				
17425 - GULF BLUA. Suite, Apt. #, Etc.									are certifying the prior notices were not received and requesting the reinstatement			
City REDINGTON SHORES State Zip Code FL 33708								fee be waived.				
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.												
Signature of Registered Agent Date 1+26-07 REGISTERED AGENT MUST SIGN												
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)												
Titles	Name of Officers and/or Directors			Street Address of E Officer and/or Dire					City / State / Zip			
\supset	LAPRY NAYMEN				19305 GULFBL			UD. INDIAN SHORES FL 33785		33785		
D	RICK DAVIS				6190.56 MINOUL B			BLUD.	SEMINOLE FL 33772			
Ð	ERNIE ZAGER				1170 GOULD ST.			-	CLEARWAT	SI. FL.	33756	
P	STEVE ANDREWS				17425 GULF BLUD			'D	REDINGTONS	HORES FL	33708	
5	5 SCOTT ANDERSEN				155-COREY AVE				ST. PETE BENCY FL 33706			
$ \mathcal{T} $	T MIKE NADEAU					7701-STACKEY RD #726 SEMINOUL FL 33772					3772	
10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.												
SIGNATURE: SIGNATURE SIGNATURE AND STEVE ANDREWS, PRESIDENT RA 1-26"07 Date Destine Phone #												