## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # P00000028222

Entity Name
 PENSACOLA BEACH BLVD., INC.



Principal Place of Business

21 EAST GARDEN STREET #200 PENSACOLA, FL 32501 Mailing Address

21 EAST GARDEN STREET #200 PENSACOLA, FL 32501

## FILED Apr 05, 2004 08:00 AM Secretary of State



03182004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-3637990 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DELGALLO, STEVEN P 21 EAST GARDEN STREET #200 PENSACOLA, FL 32501

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

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 Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating)  DATE				
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00  9. Election Campaign Fina Trust Fund Contribution		cing \$5.00 May to Added to Fees		
10.	OFFICERS AND DIREC	CTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DELGALLO, STEVEN P 21 EAST GARDEN STREET #200 PENSACOLA, FL 32501		•	U00000102189 04/05/04-80003-018 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CRY-ST-ZIP			D	O NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				N THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				·
TITLE NAME STREET ADDRESS CITY-ST-ZIP				-
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f). 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 607, 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.				

YPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR