


FOR PROFIT CORPORATION - **UNIFORM BUSINESS REPORT (UBR)**

FILED

03 SEP 30 AM 9:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000020539	
1. Entity Name Bunkley's Beach Service, Inc	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 40001 Emerald Coast Parkway	3. Mailing Address Suite, Apt. #, etc.
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DO NOT WRITE IN THIS SPACE

City & State Destin, Florida	City & State	4. FEI Number 03-0411975	Applied For Not Applicable
Zip 32541	Country Walton	Zip	Country
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent	
Name Dana C. Matthews	
Street Address (P.O. Box Number is Not Acceptable)	
607 Highway 98 East	
City Destin	FL Zip Code 32541

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 _____

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P/S/T Chad Adkinson Site 814 C-6 Egmont FL 32430	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V.P. Mike Bunkley 159 Driftwood Road Destin FL 32550	TITLE NAME STREET ADDRESS CITY - ST - ZIP	100023455191 09/30/03--01090--023 **150.00
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12. I 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE:  Chad Adkinson 5-1-03 654-7211
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)

2/10/1

Please Contact

Mari Cummins
at 850 837-0398

in regards to the UBR + Check
Regarding Bunkley's Beach Service Inc
Thank You

Gerger Maxwell