

602 UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2002 8:00 am
Secretary of State

04-23-2002 90384 045 ***150.00

DOCUMENT # P01000080237

1. Entity Name
BEACHES BIZ, INC.

Principal Place of Business

Mailing Address

~~801 CLODBERRY BRANCH WAY~~
~~JACKSONVILLE FL 32259~~

801 CLODBERRY BRANCH WAY
 JACKSONVILLE FL 32259



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

1110 HWY A1A

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
 PONTEVEDRA BEACH, FL

City & State

4. FEI Number

65-1130178

Applied For

Not Applicable

Zip

Country

Zip

Country

32082

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~WAINER, DAVID S III~~

~~0 EAST BAY STREET~~

~~SUITE 550~~

~~JACKSONVILLE FL 32202~~

Name

KEVIN ANDERSON

Street Address (P.O. Box Number is Not Acceptable)

801 CLODBERRY BRANCH WAY

City

JACKSONVILLE

FL

Zip Code

32259

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.

SIGNATURE

Kevin Anderson
 Signature, typed or printed name of registered agent and title if applicable.

TREASURER

(NOTE: Registered Agent signature required when reinstating)

4/11/02

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 PRESIDENT
 STEVE LANDOLL
 1110 HWY A1A #104
 PONTEVEDRA BEACH, FL 32082 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 CFO
 KEVIN ANDERSON
 1110 HWY A1A #104
 PONTEVEDRA BEACH, FL 32082 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 SECRETARY
 CRAIG BETHERIDGE
 1110 HWY A1A #104
 PONTEVEDRA BEACH, FL 32082 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 VP-MARKETING
 SCOTT MORITZ
 1110 HWY A1A #104
 PONTEVEDRA BEACH, FL 32082 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Kevin Anderson
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/02

Date

904-234-6001

Daytime Phone #

CR2E034 (9/01)