2003 FOR PROFIT CORPORATION

Sep 02, 2003 8:00 am Secretary of State UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # P02000011823** 09-02-2003 90191 015 ***158.75 1. Entity Name BEACHSIDE REALTY SERVICES, INC. Mailing Address Principal Place of Business **102 COLUMBIA DRIVE** 102 COLUMBIA DRIVE #107 #107 CAPE CANAVERAL, FL 32920 CAPE CANAVERAL, FL 32920 2. Principal Place of Business 3. Mailing Address Sulte, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 80-0032876 X Not Applicable \$8.75 Additional Fee Required Zìp Zip Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent SEXTON, CONNIE L Street Address (P.O. Box Number is Not Acceptable **8767 OLEANDER CT** CAPE CANAVERAL, FL 32920 Zip Code 32920 anavera a. 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. \$5.00 May Bo 9. Election Campaign Financing Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. President Connie L. Sexton ☐ Change ■ Addition TITLE ☐ Delete TITLE MALE NAME 102 Columbia DR. # 107 Cape Canaveral, FL STREET ADDRESS STREET ADDRESS CITY-ST-7P 32920 CITY.ST.7IP TILLE Delete ☐ Change ☐ Addition TILE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CRY-ST-ZIP Addition Change TITLE De lete 1filE HALE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CTY-ST-7IP TITLE De lete TITLE ☐ Change Addition MASS MALE STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZIP TITLE ☐ Delete TOLE Change Addition . NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZIP Addition TITLE Delete TALE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-2P City-st-Zip 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

Connie

FILED

Attachment ##
80142935
P02000011823 August 28,03

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	Dept. of Corporations,
	J did not receive my first or second notice for my UBR report.
	first or second notice for my
	DUBR report.
	I request a vaiver of
	I request à "vaiver" of the addional \$400 fee.
	Enclosed is the Original
	fee due (\$1500), plus \$8.75.
	1/
-	I hanks for your assistance
	I hanks for your assistance in this matter.
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	Connie 1 Sexton Pres
1	Connie L. Sexton, Pres. Beachside Realty Services
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