

FILED  
Feb 25, 2003 8:00 am  
Secretary of State

02-10-2003 90190 047 \*\*\*150.00

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000015195

1. Entity Name  
BEACH VACATION RENTALS, INC.



Principal Place of Business

10930 HUTCHISON BLVD.

PANAMA CITY BEACH FL 32407

17462 Front Beach Road Box 377  
Panama City Beach, FL 32413

Mailing Address

10930 HUTCHISON BLVD.

PANAMA CITY BEACH FL 32407

17462 Front Beach Road Box 377  
Panama City Beach, FL 32413

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country USA

4. FEI Number

03-0386310

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

CARROLL, LARRY K

10930 HUTCHISON BLVD.

PANAMA CITY BEACH FL 32407

Name

Jones, Connie R

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

~~17462 Front Beach Road Box 377~~

22901 Panama City Beach Pkwy

City

Panama City Beach

FL

Zip Code

32413

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

*Connie R. Jones*

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, 2003 Fee will be \$550.00

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
PST	CARROLL, LARRY K	10930 HUTCHISON BLVD.	PANAMA CITY BEACH FL 32407	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PST	Jones, Connie R	17462 Front Beach Road Box 377	Panama City Beach, FL 32413	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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.

SIGNATURE:

*Connie R. Jones*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-26-03

Date

850-258-6246  
Daytime Phone #

CR2E034 (10/02)