2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 10, 2003
Secretary of State

DOCUMENT# P02000036641

Entity Name: BEACH RESTORATION OF FLORIDA, INC.

Current Principal Place of Business:

6960 EASTGATE BLVD
LEBANON, TN 37090

New Principal Place of Business:

Current Mailing Address:

6960 EASTGATE BLVD
LEBANON, TN 37090

New Mailing Address:

FEI Number: 62-1868290 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CFRA, LLC
ONE HARBOR PL, 5 FLOOR
777 S HARBOUR ISLAND BLVD
TAMPA, FL 336025730 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	BRUNO, MICHAEL	
Address:	CASTLE POINT ON THE HUDSON	
City-St-Zip:	HOBOKEN, NJ 07030	
Title:	D	( ) Delete
Name:	ENGLE, THEODORE III	
Address:	6960 EASTGATE BLVD	
City-St-Zip:	LEBANON, TN 37090	
Title:	D	( ) Delete
Name:	FISHMAN, GEORGE	
Address:	35 FROST CREEK DR	
City-St-Zip:	LOCUST VALLEY, NY 11560	
Title:	D	( ) Delete
Name:	FROCHLIG, ROLLIE	
Address:	6960 EASTGATE BLVD	
City-St-Zip:	LEBANON, TN 37090	
Title:	D	( ) Delete
Name:	GELLMAN, AARON	
Address:	600 FOSTER ST	
City-St-Zip:	EVANSTON, IL 60208	
Title:	D	( ) Delete
Name:	PARNELL, WILLIAM	
Address:	P.O. BOX 1501	
City-St-Zip:	TALLAVAST, FL 34270	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THEODORE M. ENGLE PRES 01/10/2003

Electronic Signature of Signing Officer or Director — Date

KELLY RANKIN, DIRECTOR
CASTLE POINT ON THE HUDSON
HOBOKEN, NJ 07030