

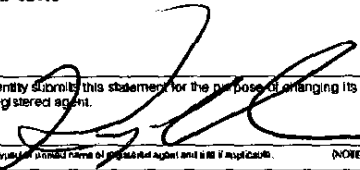
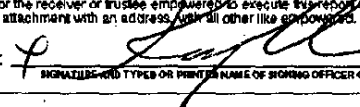
AMENDED

FILED

03 OCT 21 AM 11:19

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000073119			
1. Entity Name FORGOTTEN BEACH COAST REALTY, INC.			
Principal Place of Business 710 HIGHWAY 98 MEXICO BEACH, FL 32410		Mailing Address 710 HIGHWAY 98 MEXICO BEACH, FL 32410	
2. Principal Place of Business		3. Mailing Address HC 3 Box 98710	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Mexico Beach, FL		4. FEI Number 01-0731024	
Zip 32456		Country FL	
5. Certificate of Status Desired ☐		Applied For ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent EUBANKS, KAY 710 HIGHWAY 98 MEXICO BEACH, FL 32410			
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
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 X  DATE			
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 P NAME TAMER, MARK STREET ADDRESS 1029 E 8TH AVE CITY-ST-ZIP DENVER, CO 80218		TITLE P NAME Eubanks, Kay STREET ADDRESS HC 3 Box 98710 CITY-ST-ZIP Mexico Beach, FL 32456	
TITLE V NAME EUBANKS, KAY STREET ADDRESS 710 HIGHWAY 98 CITY-ST-ZIP MEXICO BEACH, FL 32410		TITLE V-P/Secy NAME Eubank, Clayton T STREET ADDRESS HC 3 Box 98710 CITY-ST-ZIP Mexico Beach, FL 32456	
TITLE NAME STREET ADDRESS CITY-ST-ZIP 		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	
TITLE NAME STREET ADDRESS CITY-ST-ZIP 		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	
TITLE NAME STREET ADDRESS CITY-ST-ZIP 		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	
12. I hereby certify that the information supplied in 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 the reports required by Chapter 607, Florida Statutes; and that my name appears in Block 90 or Block 11 if changed, or on an attachment with an address, with all other like approvals.			
SIGNATURE: X  DATE			

CR2003 (10/02)

7/10/23