

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 09, 2007 8:00 am**  
**Secretary of State**

04-09-2007 90037 001 \*\*\*150.00

DOCUMENT # P02000113450.

1. Entity Name

BEACHNUTZ TANNING RESORTS, INC.



Principal Place of Business

3993 TYRONE BLVD  
STE 302  
SAINT PETERSBURG FL 33709

Mailing Address

PO BOX 1885  
TARPON SPRINGS FL 34688-1885



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

PO Box 2184  
Suite, Apt. #, etc.  
TARPON SPRINGS

Suite, Apt. #, etc.

City & State

City & State

FL

Zip

Country

Zip

34689

Country

Pinellas

1st MOORE

CR2E034 (10/06)

4. FEI Number

46-0504077

Applied For

Not Applicable

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

C. STEPHEN ALLEN, ESQ  
3606 SWANN AVE  
TAMPA FL 33609

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

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, 2007 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 DP ☐ Delete  
NAME BUNDY, GREG A  
STREET ADDRESS PO BOX 1885  
CITY- ST- ZIP TARPON SPRINGS FL 34688

TITLE ☐ Change ☐ Addition  
NAME Bundy, Greg A.  
STREET ADDRESS PO Box 2184  
CITY- ST- ZIP Tarpon Springs, FL 34689-2184

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

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

TITLE ☐ Delete  
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CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
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CITY- ST- ZIP

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

GREG A. Bundy  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-30-2007

Date

727-741-0934

Daytime Phone #