## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000009653

Entity Name: TOYS @ THE BEACH, INC.

FILED Feb 20, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4339 LEGENDARY DR D-112 DESTIN, FL 32541

Current Mailing Address: New Mailing Address:

4339 LEGENDARY DR D-112 DESTIN, FL 32541

FEI Number: 90-0071584 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BRAD CONGLETON CPA, INC.

50 UPTOWN GRAYTON CIRCLE

#15

DESTIN, FL, FL 32459 US

BRAD CONGLETON CPA, INC.

50 UPTOWN GRAYTON CIRCLE

#15

SANTA ROSA BEACH, FL 32459 US

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

in the State of Florida.

SIGNATURE: BRAD CONGLETON 02/20/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: VP (X) Change ( ) Addition
Name: GALARDO, THOMAS
Address: 30 SUNSET RIDGE LANE
Address: 30 SUNSET RIDGE LANE

Address: 30 SUNSET RIDGE LANE Address: 30 SUNSET RIDGE LANE City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: VP ( ) Delete Title: ( ) Change ( ) Addition Name: GALARDO, JULIE A Name:

Address: 30 SUNSET RIDGE LANE Address: City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip:

Title: VP ( ) Delete Title: P (X) Change ( ) Addition Name: SEXTON, SCOTT Name: SEXTON, SCOTT

 Name:
 SEXTON, SCOTT
 Name:
 SEXTON, SCOTT

 Address:
 279 CHIPOLA COVE
 Address:
 279 CHIPOLA COVE

 City-St-Zip:
 DESTIN, FL 32541
 City-St-Zip:
 DESTIN, FL 32541

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SEXTON, BRÎTTANY
 Name:

 Address:
 279 CHIPOLA COVE
 Address:

 City-St-Zip:
 DESTIN, FL 32541
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: SCOTT SEXTON P 02/20/2007