

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000034092

FILED
Apr 21, 2006
Secretary of State

Entity Name: NORTH BEACHES CASA DEL MAR, INC.

Current Principal Place of Business:

3010 SOUTH THIRD STREET
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

12367 MANDARIN RD.
JACKSONVILLE, FL 32223 US

Current Mailing Address:

C/O LAWRENCE R. PATTERSON
3010 SOUTH THIRD STREET
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

12367 MANDARIN RD.
JACKSONVILLE, FL 32223 US

FEI Number: 04-3752865

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATTERSON, LAWRENCE R
3010 SOUTH THIRD STREET
JACKSONVILLE BEACH, FL 32250 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: PD () Delete
Name: REVELS, CHARLES FRED
Address: 12367 MANDARIN ROAD
City-St-Zip: JACKSONVILLE, FL 322231893

Title: STD () Delete
Name: ELLIOTT, JOHN CAIN
Address: 10 10TH STREET, #41
City-St-Zip: ATLANTIC BEACH, FL 322332562

Title: VPD () Delete
Name: MORRELL, ALVARO F
Address: 1102 1ST STREET SOUTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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:

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: CHARLES F. REVELS

PD

04/21/2006

Electronic Signature of Signing Officer or Director

Date