


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 26, 2004 8:00 am**  
**Secretary of State**

01-26-2004 90059 050 \*\*\*150.00

<b>DOCUMENT # P03000034219</b> 1. Entity Name <b>BEACH REALTY CENTER, INC.</b>																																																																																																																																			
Principal Place of Business <b>508 E. 3rd Avenue</b> <b>NEW SMYRNA BEACH, FL 32169</b>				Mailing Address <b>508 E. 3rd Avenue</b> <b>NEW SMYRNA BEACH, FL 32169</b>																																																																																																																															
2. Principal Place of Business <b>508 E. 3RD AVENUE</b>				3. Mailing Address <b>508 E. 3RD AVENUE</b>																																																																																																																															
Suite, Apt. #, etc.				Suite, Apt. #, etc.																																																																																																																															
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Country <b>FLORIDA</b>				Country <b>FLORIDA</b>																																																																																																																															
4. FEL Number <b>57-1160060</b>				<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable																																																																																																																															
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required																																																																																																																															
6. Name and Address of Current Registered Agent  <b>WRIGHT, THOMAS D</b> <b>340 NORTH CAUSEWAY</b> <b>NEW SMYRNA BEACH, FL 32169</b>				7. Name and Address of New Registered Agent Name <b>Terrill Archimbaud</b> Street Address (P.O. Box Number is Not Acceptable) <b>508 E. 3rd Avenue</b> City <b>New Smyrna Beach FL</b> Zip Code <b>32169</b>																																																																																																																															
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 <i>Terrill Archimbaud</i> <b>TERRILL ARCHIMBAUD SECRETARY</b> <b>01-23-04</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																																																																			
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees																																																																																																																															
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left; padding: 2px;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left; padding: 2px;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="width: 55%; padding: 2px;"><b>PRESIDENT</b></td> <td style="width: 10%; padding: 2px;"><input checked="" type="checkbox"/> Delete</td> <td style="width: 15%; padding: 2px;">TITLE</td> <td style="width: 55%; padding: 2px;"><b>PRESIDENT</b></td> <td style="width: 10%; padding: 2px;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;"><b>JAMES ARCHIMBAUD</b></td> <td></td> <td style="padding: 2px;">NAME</td> <td style="padding: 2px;"><b>R.MARIE MC FADDEN</b></td> <td></td> </tr> <tr> <td style="padding: 2px;">STREET ADDRESS</td> <td style="padding: 2px;"><b>5300 S. 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12. I hereby certify that the information supplied with 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 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.																																																																																																																																			
<b>SIGNATURE: <i>Terrill Archimbaud</i> TERRILL ARCHIMBAUD SECRETARY (386) 428-1212</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																																																																			

**44004451**