

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000155436

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: ON THE BEACH MAINTENANCE, INC.

**Current Principal Place of Business:**

19455 GULF BLVD  
8A  
INDIAN SHORES, FL 33785

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 581  
BAY PINES, FL 33744

**New Mailing Address:**

FEI Number: 20-0600676

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CERCEK, LISA K  
17854 LEE AVE.  
302  
REDINGTON SHORES, FL 33708 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: P ( ) Delete  
Name: CERCEK, GARY J  
Address: 17854 LEE AVE#302  
City-St-Zip: REDINGTON SHORES, FL 33708

Title: VP ( ) Delete  
Name: CERCEK, LISA  
Address: 1736 ADAM CIR S.  
City-St-Zip: LARGO, FL 33771

Title: D ( ) Delete  
Name: BROWN, JAMES  
Address: 19455 GULF BLVD. #8A  
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

**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 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: LISA CERCEK

VP

03/23/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date