

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000080747

Entity Name: BEACHSIDE TILE, INC.

FILED
May 12, 2008
Secretary of State

Current Principal Place of Business:

10370 W. DEEP CREEK BLVD.
HASTINGS, FL 32145

New Principal Place of Business:

Current Mailing Address:

10370 W. DEEP CREEK BLVD.
HASTINGS, FL 32145

New Mailing Address:

1628 BAY HAWK LANE
ST. AUGUSTINE, FL 32084

FEI Number: 20-1362699

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VOGEL, CHRISTOPHER M
10370 W. DEEP CREEK BLVD.
HASTINGS, FL 32145 US

Name and Address of New Registered Agent:

VOGEL, CHRISTOPHER M
1628 BAY HAWK LANE
ST. AUGUSTINE, FL 32084 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.

SIGNATURE: KELLY VOGEL

05/12/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: VOGEL, CHRISTOPHER M
Address: 10370 W. DEEP CREEK BLVD.
City-St-Zip: HASTINGS, FL 32145

Title: D () Delete
Name: VOGEL, KELLY A
Address: 10370 W. DEEP CREEK BLVD.
City-St-Zip: HASTINGS, FL 32145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: VOGEL, CHRISTOPHER M
Address: 1628 BAY HAWK LANE
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: D (X) Change () Addition
Name: VOGEL, KELLY A
Address: 1628 BAY HAWK LANE
City-St-Zip: ST. AUGUSTINE, FL 32084

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: KELLY VOGEL

D

05/12/2008

Electronic Signature of Signing Officer or Director

Date