

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000015120 (7)

1. Corporation Name

BEACH ROAD PRODUCTION, INC.



Principal Place of Business

1730 MANASOTA BEACH RD.
APT. 111
ENGLEWOOD FL 34223

Mailing Address

1730 MANASOTA BEACH RD.
APT. 111
ENGLEWOOD FL 34223

3. Date Incorporated or Qualified
02/26/1993

3a. Date of Last Report
04/04/1995

2. Principal Place of Business

21 2253 OLEADA COURT

2a. Mailing Address

26 2253 OLEADA COURT

4. FEI Number
65-0396263

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 ENGLEWOOD, FL

City & State

28 EN

Zip Country

24 34224

Zip

29

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ITTERSAGEN, SCOTT D
% BATSEL MCKINLEY & ITTERSAGEN P.A.
1861 PLACIDA RD., SUITE 104
ENGLEWOOD FL 34223

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and date of signature

(If filer is Registered Agent, signature required on this statement)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME ITTERSAGEN, BETTE K
STREET ADDRESS 1730 MANASOTA BEACH RD., APT. 111
CITY-ST-ZIP ENGLEWOOD FL 34223

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P
1.2 NAME BETTE K. ITTERSAGEN
1.3 STREET ADDRESS 2253 OLEADA COURT
1.4 CITY-ST-ZIP ENGLEWOOD FL 34224

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Bette K. Ittersagen, President

5/1/96

941-697-8023

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Display Phone #

CR2E034 (12/95)