

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

APPROVED  
FILED

95 APR 28 PM 11:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION  
ANNUAL REPORT  
1995



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

DOCUMENT # P93000037000 (5)

1. Corporation Name

ISLAND BEACH INVESTMENT, INC.

Principal Place of Business

1104 N. COLLIER BLVD.  
MARCO ISLAND FL 33907

Mailing Address

1104 N. COLLIER BLVD.  
MARCO ISLAND FL 33907

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/21/1993

3a. Date of Last Report

03/30/1994

4. FEI Number

65-0422113

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

2. Principal Place of Business

21. ~~1104 N. COLLIER BLVD.~~

State, Apt. #, etc.

22. ~~1104 N. COLLIER BLVD.~~

City & State

23. ~~MARCO ISLAND FL~~

Zip

24. ~~33907~~

2a. Mailing Address

26. ~~1104 N. COLLIER BLVD.~~

State, Apt. #, etc.

27. ~~1104 N. COLLIER BLVD.~~

City & State

28. ~~MARCO ISLAND FL~~

Zip

29. ~~33907~~

Country

30. ~~USA~~

9. Name and Address of Current Registered Agent

GREUSEL, JAME B  
1104 N. COLLIER BLVD.  
MARCO ISLAND FL 33907

10. Name and Address of New Registered Agent

81. Name

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

83. City

84. State

85. Zip Code

C. Peter Quisenberry  
148 S. Beach Dr.  
MARCO ISLAND FL 33907

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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

C. Peter Quisenberry

C. Peter Quisenberry

2/26/95

(Signature of agent or printed name of registered agent and title if required)

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

|                |                                   |
|----------------|-----------------------------------|
| TITLE          | PSTD                              |
| NAME           | JURSINSKI, KENNETH A              |
| STREET ADDRESS | 1104 N COLLIER BLVD               |
| CITY, ST, ZIP  | MARCO ISLAND FL                   |
| TITLE          | <del>C. Peter Quisenberry</del>   |
| NAME           | <del>C. Peter Quisenberry</del>   |
| STREET ADDRESS | <del>148 S Beach Dr</del>         |
| CITY, ST, ZIP  | <del>MARCO ISLAND, FL 33907</del> |
| TITLE          | DIRECTOR                          |
| NAME           | C. Peter Quisenberry              |
| STREET ADDRESS | 148 S Beach Dr                    |
| CITY, ST, ZIP  | MARCO ISLAND, FL 33907            |
| TITLE          | PRESIDENT                         |
| NAME           | NANCY J. Quisenberry              |
| STREET ADDRESS | 148 S Beach Dr                    |
| CITY, ST, ZIP  | MARCO ISLAND, FL 33907            |
| TITLE          |                                   |
| NAME           |                                   |
| STREET ADDRESS |                                   |
| CITY, ST, ZIP  |                                   |
| TITLE          |                                   |
| NAME           |                                   |
| STREET ADDRESS |                                   |
| CITY, ST, ZIP  |                                   |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                    |                                                                   |
|--------------------|-------------------------------------------------------------------|
| 1.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME           |                                                                   |
| 1.3 STREET ADDRESS |                                                                   |
| 1.4 CITY, ST, ZIP  |                                                                   |
| 2.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME           |                                                                   |
| 2.3 STREET ADDRESS |                                                                   |
| 2.4 CITY, ST, ZIP  |                                                                   |
| 3.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME           |                                                                   |
| 3.3 STREET ADDRESS |                                                                   |
| 3.4 CITY, ST, ZIP  |                                                                   |
| 4.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME           |                                                                   |
| 4.3 STREET ADDRESS |                                                                   |
| 4.4 CITY, ST, ZIP  |                                                                   |
| 5.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME           |                                                                   |
| 5.3 STREET ADDRESS |                                                                   |
| 5.4 CITY, ST, ZIP  |                                                                   |
| 6.1 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 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(h)(4), 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 applicable, or on an attachment with an address.

SIGNATURE:

C. Peter Quisenberry  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/95

(Signature Chapter 6)