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PROFIT CORPORATION ANNUAL REPORT

1999



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FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 05, 1999 8:00 am **Secretary of State**

03-05-1999 90029 045 ***150.00

SILVER BEACH INVESTMENTS, INC.

Mailing Address Principal Place of Business 1940 SEVILLE DRIVE 1940 SEVILLE DRIVE PENSACOLA FL 32503 PENSACOLA FL 32503 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed 01/01/1994 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business 59-3216366 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 Election Compaign Financing \$5.00-Hary-De-City & State City & State Added to Fees Trust Fund Contribution 28 23 Country Country Zip This corporation owes the current year Intangible □No ☐ Yes Personal Property Tax. 29 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MERRILL, W C JR. Street Address (P.O. Box Number is Not Acceptable) 1940 SEVILLE DRIVE PENSACOLA FL 32503 83 Zip Code 84 City 85 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 red Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. OFFICERS AND DIRECTORS Addition ☐ Change □ DELETE 1.1 TILE TITLE MERRILL, W.C. JR. 12 NAME NAME 1940 SEVILLE DR. 1.3 STREET ADDRESS STREET ADDRESS PENSACOLA FL 32503 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Change . ☐ Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 51 TIDE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIF CITY-ST-ZIP

64 CITY-ST-ZIF CITY-ST-ZIP 14. 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 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 emowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE

TITLE

NAME

STREET ADDRESS

DFLETE

Change

☐ Addition

CR2E034 (11/98)