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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 13 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000029197 (8)

BEACHES BOOKS ON TAPE, INC.

Mailing Address Principal Place of Business 2870 UNIVERSITY BLVD. WEST 2870 UNIVERSITY BLVD. WEST SUITE 103 SUITE 103 DO NOT WRITE IN THIS SPACE JACKSONVILLE FL 32217 JACKSONVILLE FL 32217 3. Date Incorporated or Qualified 04/18/1994 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-3236865 Not Applicable 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Zin Country 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Namo KENT, J. CLEVELAND 2870 UNIVERSITY BLVD. WEST 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 103 83 JACKSONVILLE FL 32217 Zip Code 84 City 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 Signature, typed or printed name of registered agent and title it applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change Addition DELETE 1.1 THE F TITLE KENT, JAMES C JR. 1.2 NAME NAME 2870 UNIVERSITY BLVD WEST, SUITE 103 1.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32217 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 2.1 TITLE TITLE KENT, J. CLEVELAND 2.2 NAME NAME 2870 UNIVERSITY BLVD WEST, SUITE 103 2.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32217 2.4 CITY - ST - ZiP CITY-ST-ZIP ___ Addition DELETE ☐ Change 3.1 TITLE TITLE KENT, RITA S 3.2 NAME NAME 2870 UNIVERSITY BLVD WEST, SUITE 103 3.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32217 3.4. CITY - ST - ZłP CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change Addition DELETE TITLE **5.1 TITLE** 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 6 1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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 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.