FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000069456 (9)

R.P.O. BEACH DEVELOPMENT, INC.

Principal Place of Business		Mailing Address			IO OHIOB IONIA BIBON BITTO DINI IODI
503 N. ORLANDO AVE.		503 N. ORLANDO AVE.			
SUITE 105 COOOA BEACH FL 32931		SUITE 105 COCOA BEACH FL 32931		DO NOT WRITE IN THIS SPACE	
J COOST CLINOTIE CLIOT		OCOON DENOTE IE GESOI		3. Date Incorporated or Qualified	
				09/21/1994	
<u>. </u>	lace of Business	2a, Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-3268352	Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	e current year Intangible X Yes No
24	25 9, Name and Address of Curre		30	Personal Property Tax due June 30. 10. Name and Address of New Registe	
SHOEMAKER, JOHN B					
503 N. ORLANDO AVE.			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
COCOA BEACH FL 32931				areas (1.0. box number is not receptable)	
			63		
			84 City		85 Zip Code
11 Pursuant	to the provisions of Sections 607 DM	12 and 607 1508. Florida Statuto	s the above named por		ee of changing its registered
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.					
, •	ин та ншал ж ил, анстак-серт тое оонд	Janons or, section 607.0505, rior	ioa Statutes.		
SIGNATURE	Signature, typed or printed name of registered ag		Registered Agent signature recu	uired when reinstating) DA	1E
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	PDT CONTRACT	☐ DELETE	1.1 TITLE		Change Addition
NAME KODSI, ALBERT STREET ADDRESS 503 N ORLANDO AVENUE, #105		#10E	1.2 NAME 1.3 STREET ADDRESS		
CITY-\$1-ZIP	COCOA BEACH FL	F 103	1.4 CITY - ST- ZIP		
TITLE	VS	DELETE	2.1 TITLE		Change Addition
NAME	SHOEMAKER, JOHN B		2.2 NAME		
STREET ADDRESS	503 N ORLANDO AVENUE, 1	₹105	2.3 STREET ADDRESS		
CITY-ST-ZIP	COCOA BEACH FL	D DELÉTE	2. 4 CITY - ST - ZIP		
TITLE		☐ DEFELE	3.1 TITLE		Change Addition
NAME Street address			3.2 NAME 3.3 STREET ADDRESS		
CITY-\$1-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	41 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		The sta	4.4 CHY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME STREET ADDRESS			5.2 NAME. 5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-S1-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS	,		6.3 STREET ADDRESS		

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 introduced with an address. JOHN B. SHOEMAKER, VP

6.4 CITY - ST - ZIP

(407) 784-3266

FILED

May 11 1998 8:00am

Secretary of State