

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 FEB -7 PM 1:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000084428 (9)

1. Corporation Name

PARADISE BEACH HOTEL AND CLUB, INC.

700001401657
-02/09/95--01054--007
****208.75 ****208.75

DO NOT WRITE IN THIS SPACE.

Principal Place of Business Mailing Address
4950 NORTH DIXIE HWY
SUITE A
FORT LAUDERDALE FL 33334
4950 NORTH DIXIE HWY
SUITE A
FORT LAUDERDALE FL 33334

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

3. Date Incorporated or Qualified

11/18/1994

3a. Date of Last Report

N/A

4. FBI Number

☒ 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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KENNELLY, JOHN S
4950 NORTH DIXIE HWY.
SUITE A
FORT LAUDERDALE FL 33334

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 607.1508, 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, Sections 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if any

(NOTE: Registered Agent signature required when resigning)

1/31/95
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP
NAME KENNELLY, JOHN S
STREET ADDRESS 333 KEY PALM RD.
CITY-ST-ZIP BOCA RATON FL 33432

1.1 TITLE S
1.2 NAME CHANEY, MARVIN T
1.3 STREET ADDRESS 4950 N. DIXIE HIGHWAY
1.4 CITY-ST-ZIP FORT LAUDERDALE, FL 33334
☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE Secretary
2.2 NAME CHANEY, MARVIN T.
2.3 STREET ADDRESS 4950 N. DIXIE Highway
2.4 CITY-ST-ZIP FORT LAUDERDALE, FL 33334
☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE VICE PRESIDENT
3.2 NAME KENNELLY, JOHN S.
3.3 STREET ADDRESS 4950 N. DIXIE Highway, Suite A
3.4 CITY-ST-ZIP FORT LAUDERDALE, FL 33334
☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
2-7
☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Marvin T. Chaney

DATE

1-31-95 305-491-4600
(Typed Name)