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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90132 048 ***150.00

DOCUMENT # P94000087913

UMBRELLA BEACH, INC.

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Principal Place of Business Mailing A	Address				1 1961 991 1	18 1911) B1811 BB111 B	Stil Adiri BAri	., 1811: 1881: 1814	15 000 1111 1001
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	ng Address			ľ	65-054673	n		<u> </u>	ot Applicable
21 26 Suite	, Apt. #, etc.				037034013	<u>y</u>			Additional
22 27 -	· · · · · · · · · · · · · · · · · · ·				5. Certificate of S	 _		Fee Re	equired
City & State City	& State			1	6. Election Cam				May Be
23 28					Trust Fund Co				to Fees
Zip Country Zip		Country	1	}	8. This corporati		rent year I		
24 25 29	30				Personal Prop			Yes	□No
9. Name and Address of Current Registered	Agent	- -	T		10. Name and A	ddress of New	Registere	d Agent	
		81	Nam	е					
GRAVELY, JEFFREY D 3651 CORTEZ ROAD WEST		82	Stre	t Address	(P.O. Box Numb	er is Not Accep	table)		·
SUITE 300		83	 						
BRADENTON FL 34210		00	'						_
DRAUENIUM FL 342 IU		84	City				F	85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.150 office or registered agent, or both, in the State of Florida. Sur	ch change was author	inzen ny	e-name	d corporat	tion submits this	statement for the	a numose	of changing its	registered egistered
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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, with all other like empowered.

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

61 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

Addition

Change