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May 13 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000045871 (7)

1. Corporation Name

BEACH COLONY CORPORATION

Principal Place of Business

13801 PERDIDO KEY DR.
PENSACOLA FL 32505

Mailing Address

13801 PERDIDO KEY DR.
PENSACOLA FL 32507-8502

2. Principal Place of Business

21

Suite, Apt. #, etc

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

RETHATI, GEORGE O
13801 PERDIDO KEY DR.
PENSACOLA FL 32505

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, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent's signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME

PD
ZOHOURI, FRED
13801 PERDIDO KEY DR.
PENSACOLA FL 32505

☐ DELETE

STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME

VP
RETHATI, GEORGE
13801 PERDIDO KEY DR.
PENSACOLA FL 32505

☐ DELETE

STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME

ST
KEUCHER, LINDA
13801 PERDIDO KEY DR.
PENSACOLA FL 32505

☐ DELETE

STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME

☐ DELETE

STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME

☐ DELETE

STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME

☐ DELETE

STREET ADDRESS
CITY-ST-ZIP

13.

1.1 TITLE
1.2 NAME

1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME

2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME

3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME

4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME

5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME

6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(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. I am an officer or director of the corporation and the registered agent 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 applicable.

SIGNATURE

G.O. Rethati VP. 4/2/97 108-407-2880

CR2E034 (9/96)