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 # P95000045871 (

Country

9. Name and Address of Current Registered Agent

25

rethati, george o 13601 Perdido key dr.

PENSACOLA FL 32505

BEACH COLONY CORPORATION

Principal Place of Business

13601 PERDIDO KEY DR. PENSACOLA FL 32505

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

24

Zip

Mailing Address

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

26

27

28

29

13601 PERDIDO KEY DR. PENSACOLA FL 32505

FILED Jul 16 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/07/1995 4. FEI Number Applied For 59-3377973 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes ☐ No 10. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable)

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.

Country

82

83 City

30

SIGNATURE Signature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TILLE 1.1 TITLE Change Addition **ZO**HOURI, FRED NAME 1.2 NAME 13601 PERDIDO KEY DR. STREET ADDRESS 1.3 STREET ADDRESS PENSACOLA FL 32505 CITY-ST-ZIP 1.4 CITY-S1-ZIP TITLE DELETE 2.1 TITLE ☐ Change Addition RETHATI, GEORGE NAME 2.2 NAME 13601 PERDIDO KEY DR. STREET ADDRESS 2.3 STREET ADDRESS PENSACOLA FL 32505 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change TITLE ___ Addition 3.1 TITLE Keucher, Linda NAME 3.2 NAME 13601 PERDIDO KEY DR. STREET ADDRESS 3.3 STREET ADDRESS PENSACOLA FL 32505 CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change TITLE Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE TITLE 61 THLE Change ■ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS City-ST-7IP 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this using 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 supplymental and if report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver of trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on in glashmat, twith all address.

;R2E034 (10/97)