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

Mailing Address POST OFFICE BOX 950382

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

28

LAKE MARY FL 32795-0382

CORPORATION ANNUAL REPORT

1997

Principal Prace of Business

2. Principal Place of Business

Suite, Apt. #, etc

SIGNATURE:

City & State

23

2:0

648 ASLAND CRT

**DELTONA FL 32725** 



HI ORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000052282 (7)

Country

BEACHSIDE INVESTIGATIONS. INC.

Florida Statutes 29 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name WIEDRICK, ROBERT BRUCE 648 ASHLAND CT **B2** Street Address (P.O. Box Number is Not Acceptable) **DELTONA FL 32725** 83 84 City Zip Code 85 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 argent 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) types were not to also of responsible or an orbit of applicable. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) OFFICERS AND DIRECTORS 13. 12. Addition DELETE 1.1 TITLE Change . THE NAME: WIEDRICK, ROBERT BRUCE 1.2 NAME CR2E034 POST OFFICE BOX 950382 N/A 1.3 STREET ADDRESS STREET ADJUGENS LAKE MARY FL 32795-0382 1.4 CHTY - \$1 - 7IP  $O(1) \cdot S^{\gamma}$ Change DELETE 2.1 TITLE Addition 1614 2.2 NAME NAMI 23 STREET ADDRESS \$56:E1 ALORESS 2 4 CITY - ST- ZIP City's 28 DELETE Add-tion Change  $\mathcal{D}^{\tau}LE$ 31 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY - \$1 - ZIP DELETE Add-tion 4.1 TITLE TillE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY - ST - 7IP CHY 51 70 DELETE Change 51 TITLE 1 ILE HAM: 5.2 NAME 5.3 STREET ADDRESS SPREET ADDRESS 54 CITY-SE-ZIP (HY \$1-7) Change Addition DEFETE 6.1 THLE DRE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-S1-ZIP 14. If do 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 includes the same legal effect as if made under oath; that i am an officer or direction to the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name 13 if changes or on a attachment with an address

Country

FILED Mar 25 1997 8:00am Secretary of State

3a. Date of Last Report

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

05/01/1996



Yes No

This corporation has liability for intangible tax under s. 199.032,

3. Date Incorporated or Qualified

07/03/1995

59-3324446

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution