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

CORPORATION ANNUAL REPORT

1998

NAME

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000073276 (4)

FLORIDA BEACH DEVELOPMENT, INCORPORATED

Principal Place of Business Mailing Address 803 PINE VILLAGE LANE 803 PINE VILLAGE LANE NAPLES FL 34108 NAPLES FL 34108 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/20/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 65-0620784 Not Applicable Suite, Apt. #. etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 25 30 Personal Property Tax due June 30. ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name archer, denise h 803 PINE VILLAGE LANE 82 Street Address (P.O. Box Number is Not Acceptable) NAPLES FL 38983 34108 83 84 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. Denise Archen Director 12, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE Change Addition 1.1 TITLE ARCHER, DENISE H NAME 1.2 NAME **803 PINE VILLAGE LANE** STREET ADDRESS 1.3 STREET ADDRESS naples fl 34108 CITY-ST-ZIP 1.4 City - ST- ZIP TITLE ☐ DELETE 2.1 TITLE Change Addition NAME ARCHER, TERRY P 2.2 NAME **803 PINE VILLAGE LANE** STREET ADDRESS 2.3 STREET ADDRESS 34108 **NAPLES FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3 1 TITLE Change Addition NAME 32 NAME STREET ADDRESS **3.3 STREET ADDRESS** CITY-ST-ZIP 3.4. C(TY-\$1-2(P TITLE DELET**E** ☐ Change 4.1 TITLE ■ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Addition Channe NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition

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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

FILED Apr 20 1998 8:00am Secretary of State