

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 25, 2001 08:00 AM**
Secretary of State**DOCUMENT # P97000031241**1. Entity Name
BEACHFRONT PROPERTIES OF BOCA GRANDE, INC.Principal Place of Business
301 PARK AVE.
SUITE B
BOCA GRANDE FL 33921
USMailing Address
P.O. BOX 1618
BOCA GRANDE FL 33921
US2. Principal Place of Business
307 EAST RAILROAD AVENUE.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
BOCA GRANDE FL

City & State

4. FEI Number
65-0745456Applied For
Not ApplicableZip
33921Country
USZip
Country5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ANDERSON JOSEPH
16101 SUNSE PINES CIRCLE
PO BOX 729
BOCA GRANDE FL 33921
US

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

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

(NOTE: Registered Agent signature required when reinstating)

04/25/2001

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
VP
WOOD MAURICE BMR
5000 GASPARILLA ROAD, BM314
BOCA GRANDE FL 33921TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
S
BUETTIN WILLIAM MR
5000 GASPARILLA ROAD, GM101
BOCA GRANDE FL 33921TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
T
ANDERSON JOSEPH BMR
16101 SUNSET PINES CIRCLE
BOCA GRANDE FL 33921TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete
P
HENDRICKS CLAIRE
5734 SANDY POINTE DR
SARASOTA FL 34233TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition
P
ANDERSON YVONNE MMRS
16101 SUNSET PINES CIRCLE
BOCA GRANDE FL 33921TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Joseph Anderson

T

04/25/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)