

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

FILED
Jun 18 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000037179 (3)

1. Corporation Name
BEACHES CORNER, INC.

Principal Place of Business
1800 INDEPENDENT SQUARE
JACKSONVILLE FL 32202

Mailing Address
1800 INDEPENDENT SQUARE
JACKSONVILLE FL 32202



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 1 Independent Drive
Suite, Apt. #, etc.

27 Suite 1600
City & State

28 Jacksonville, FL
Zip Country

29 32202-5009 30 USA

3. Date Incorporated or Qualified

04/24/1997

4. FEI Number

59-3445087

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

WILLIAMS, L D
1800 INDEPENDENT SQUARE
JACKSONVILLE FL 32202

10. Name and Address of New Registered Agent

81 Name

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

83 1 Independent Drive, Suite 1600

84 City

Jacksonville

FL

85 Zip Code

32202-5009

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 to 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 of the party, firm, or person named in this report.

(Not) Registered Agent signature required when reinstating

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
DP	Lovett, W. R. II	1 Independent Drive, Suite 1600	Jacksonville, FL 32202-5009
DVS	Kreis, R. R.	1 Independent Drive, Suite 1600	Jacksonville, FL 32202-5009
DVT	Williams, L. D.	1 Independent Drive, Suite 1600	Jacksonville, FL 32202-5009
AS	Mello, Jeannine	1 Independent Drive, Suite 1600	Jacksonville, FL 32202-5009

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY-ST-ZIP
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY-ST-ZIP
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY-ST-ZIP
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY-ST-ZIP
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY-ST-ZIP
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY-ST-ZIP

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.

SIGNATURE

L. D. Williams

L. D. Williams, Vice President

6/2/98

(904) 634-8808

CR2E034 (10/97)