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May 07 1998 8:00ar
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # **P97000039230**
1. Corporation Name
BEACH BARN WHOLESALE FURNITURE, INC

Principal Place of Business

Mailing Address

**20520 BACK BEACH ROAD
PANAMA CITY, FL 32413**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

4/30/97

2. Principal Place of Business

2a. Mailing Address

21 **20520 BACK BEACH RD** 25 **(SAME)**

Suite, Apt. #, etc

Suite, Apt. #, etc

City & State

City & State

23 **PANAMA CITY, FL** 26

Zip

Country

Zip

Country

24 **32413** 25 **BAY** 28

29

3. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name **RICHARD CLARK CRENSHAW**

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

432 YORK STREET

83

84 City

GULF BREEZE

FL

85 Zip Code

32561

11. Pursuant to the provisions of Sections 607.6502 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.

SIGNATURE

Signature, typed or printed name of registered agent and this if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PRESIDENT/SECT.** ☐ DELETENAME **WILLIAM L PHILLIPS**STREET ADDRESS **804 DOWNTOWN BLVD**CITY-ST-ZIP **MOBILE, AL 36609**TITLE **VICE PRES./TREAS.** ☐ DELETENAME **CHARLES B PHILLIPS**STREET ADDRESS **111 BEVERLY COURT**CITY-ST-ZIP **MOBILE, AL 36604**TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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

**DIRECTOR
GAYLE C PHILLIPS
804 DOWNTOWN BLVD
MOBILE, AL 36609**

**DIRECTOR
CHERYL T PHILLIPS
111 BEVERLY COURT
MOBILE, AL 36609**

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***150.00

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WILLIAM L PHILLIPS

PRES

4/28/98

334-342-0823

Docketing Phone # 0096745