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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000103931 (6)

BEGMAX BAY ROUNT NING X BAY POINT REALTY, INC.

mar4,1998

Principal Place of Business

Names Change Fires With State
Mailing Address

FILED Apr 20 1998 8:00am Secretary of State



7031 SE 52 BAYONET POINT FL 34567		7031 SE 52 BAYONET POINT FL 34867			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
					12/09/1997
2. Principal P	lace of Business	2a. Mailing Address			4 EEI Number
	<u>SR52</u>	26 7031 SK52			5 9 – 348 0633 Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State		City & State	City & State		6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution
Zip	Country	Zip	Country	<i>†</i>	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
24	25 S. Name and Address of Current	29 30 Registered Agent	1		Personal Property Tax due June 30. L Yes No 10. Name and Address of New Registered Agent
LUDINGTON, CHARLES				Name	
	939 PEBBLE BEACH CIRCLE		82		
	YONET PT. FL 34667			Street	t Address (P.O. Box Number is Not Acceptable)
	TOTAL TE OTOD		83	<u> </u>	****
			-		leal 20 Code
	be .		84	City	FL 85 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.					
SIGNATURE Signature, typod or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND		13.	·	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PDT	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	LUDINGTON, CHARLES		1.2 NAME		
STREET ADDRESS	12939 PEBBLE BEACH CIRCL	E	1.3 STREET	ADDRESS	
CITY-ST-ZIP	BAYONET POINT FL 34667		1.4 CITY-5	ST - ZIP	
TITLE	VSD, PT	☐ DELETE	2.1 THILE		☐ Change ☐ Addition
NAME	LUDINGTON, NANCY		2.2 NAME		
STREET ADDRESS	12939 PEBBLE BEACH CIRCL	E	2.3 STREET	ADDRESS	
CITY-ST-ZIP	BAYONET POINT FL 34667		2. 4 CITY - ST - ZIP		
TITLE	DELETE 3.1 T		3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET	ADDRESS	
CITY-ST-ZIP		·····	3.4. CITY -	ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET		
CITY-ST-ZIP		- DELETE	4.4 CITY - S	ST-ZIP	Change Addition
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		7>
STREET ADDRESS			5.3 STREET		4.20
CITY-ST-ZIP		DELETE	5.4 CITY - 9 6.1 TITLE	1 - ZIP	BUUDE453UGBhange Addition
TITLE		☐ DELETE			800002433046hange Addition -04/20/3801021002
NAME ADDRESS			6.2 NAME	4000000	#:##156 BB
STREET ADDRESS			6.3 STREET		1 1 1 A GOOD E OVER
14. I hereby c	ertify that the information supplied wit	h this filing does not qualify for t	6.4 CITY-S		ted 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 changes, or on an attachment with an address.					