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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P98000090679 1. Corporation Name

MY BEACH HOUSE OF SEA PALM VILLAGE, INC.

Principal Place of Business 1532 E. GULF BEACH DR. ST. GEORGE ISLAND FL 32328 Mailing Address

1532 E. GULF BEACH DR. ST. GEORGE ISLAND FL 32328

## FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90073 009 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

					10/23/1998			_
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		1 AD	plied For
21		26					No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		\$8.75 A Fee Re	
City & State	<del>, ~~ · · · · · · · · · · · · · · · · · ·</del>	City & State			6. Election Campaign Financing	_	\$5.00	May Be
23 28					Trust Fund Contribution		Added t	•
Zip	Country	Zip	Count	ry	8. This corporation owes the curre	ent year Intang	ible	
24	25	29	30		Personal Property Tax.		] Yes	□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New R	egistered Ag	ent	
			8	1 Name				
HUGHES, WHALEY				Chanal A	ddress (P.O. Box Number is Not Accepta	hla)		<del></del>
1532 E. GULF BEACH DR.				Street A	datess (F.O. Box Number is Not Accepta	ne)		
ST. GEORGE ISLAND FL 32328				3				
						· <del></del>		
				4 City	•	FL!	85 Zip (	
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	f Florida. Such change was au	ithorized b	by the corpo:	orporation submits this statement for the ration's board of directors. I hereby accep	purpose of cha t the appointm	anging its ient as re	registered gistered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Ag	gent signature re-	quired when reinstating)	DATE		
12.	O OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND I	DIRECTO	RS IN 12
TITLE	President	□ DELETE	1.1 TITLE				] Change	☐ Addition
NAME	Whaley Hughes	1.5	1.2 NAMI	E				
STREET ADDRESS	150 7 4 5 5 5 5 5	ch Or.	1.3 STRE	ET ADDRESS			-	
CITY-ST-ZIP	St. George Island FL32328		1,4 CITY-ST-ZIP					
TITLE	Sac Trace 1 DELETE		2.1 TITLE				Change	Addition
NAME	Bodin W Hushe	5 .	2.2 NAM	E				
STREET ADDRESS		ach Dr. ;		ET ADDRESS	•			
	SI CARL TEL	1FL32328	2.4 CITY					
CITY-ST-ZIP -	34 George 15101	DELETE	3.1 TITLE				Change	Addition
			3.2 NAM			_	-	
NAME				EET ADDRESS				
STREET ADORESS			i i			•		
CITY-ST-ZIP		☐ DELETE	4.1 TITLE	'-\$T-ZIP			Change	☐ Addition
TITLE			4. 2 NAM					
NAME								
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP		□ on etc	4.4 CITY				Change	Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAM	1		L,		
NAME				- 1				
STREET ADORESS				ET ADORESS				
CITY-ST-ZIP			5.4 CITY				70	<b>□ 4</b> 3 300 ±
TITLE		☐ DELETE	6.1 TITLE				] Change	Addition
NAME			6.2 NAM	E				
STREET ADDRESS			6.3 STRE	EET ADDRESS				•
			6.4 CITY	-ST-71D				
CITY-ST-ZIP					in Section 119.07(3)(i), Florida Statutes.			

4. 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 informatio 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, with all other like empowered.

SIGNATURE

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/99

850-927-2391

ZEU34 (11/98)