

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000015511

1. Entity Name

BEACH PLAY, INC.

FILED
Jan 26, 2000 8:00 am
Secretary of State

01-26-2000 90008 033 ***150.00

Principal Place of Business

15594 IONA LAKES DRIVE
FORT MYERS FL 33908

Mailing Address

15594 IONA LAKES DRIVE
FORT MYERS FL 33908-1881

80007668



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1668 I Street

Suite, Apt. #, etc.

3. Mailing Address

1425 Larkwood Square N

Suite, Apt. #, etc.

City & State

Ft Myers Beach FL

City & State

Ft Myers FL

4. FEI Number

65-0902952

Applied For

Not Applied

Zip 33931

Country

USA

Zip

33914

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

O'GILVIE, ERIC
15594 IONA LAKES DRIVE
FORT MYERS FL 33908

7. Name and Address of New Registered Agent

Name

Eric O'Gilvie

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

1425 Larkwood Sq N

City

Ft Myers

FL

Zip Code

33914

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)

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, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. 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 D ☐ Delete
NAME O'GILVIE, ERIC
STREET ADDRESS 15594 IONA LAKES DRIVE
CITY-ST-ZIP FORT MYERS FL 33908

TITLE D ☒ Change ☐ Addition
NAME Eric O'Gilvie
STREET ADDRESS 1425 Larkwood Sq N
CITY-ST-ZIP Ft Myers, FL 33914

TITLE D ☐ Delete
NAME O'GILVIE, TAMARA
STREET ADDRESS 15594 IONA LAKES DRIVE
CITY-ST-ZIP FORT MYERS FL 33908

TITLE D ☒ Change ☐ Addition
NAME Tamara O'Gilvie
STREET ADDRESS 1425 Larkwood Sq N
CITY-ST-ZIP Ft Myers, FL 33914

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #