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Feb 19, 1999 8:00 am
Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S01886

1. Corporation Name
BEACHCITY REALTY, INC.



Principal Place of Business
11983 TAMiami TRAIL NORTH
SUITE 157
NAPLES FL 34110
US

Mailing Address
11983 TAMiami TRAIL NORTH
SUITE 157
NAPLES FL 34110
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 144 CORAL VINE DRIVE
Suite, Apt. #, etc.
22
City & State
23 NAPLES, FL
Zip Country
24 34110 25 COLLIER
2a. Mailing Address
26 144 CORAL VINE DRIVE
Suite, Apt. #, etc.
27
City & State
28 NAPLES, FL
Zip Country
29 34110 30 COLLIER

3. Date Incorporated or Qualified
09/12/1990

4. FEI Number
65-0221979

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

MOORE JR, JAMES B
2239 IMPERIAL GOLF COURSE BLVD
NAPLES FL 34110

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
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

James B. Moore Jr.

1-4-1999

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTS
NAME MOORE, JAMES B
STREET ADDRESS 2239 IMPERIAL GOLF COURSE BLVD.
CITY-ST-ZIP NAPLES FL 34110

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 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, with all other like empowered.

SIGNATURE:

James B. Moore Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-4-1999

Date

941-597-1958

Daytime Phone #

CR2E034 (11/98)

0459446