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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # \$12759

(4)

	BAY BEACH COMPANY, IN						
Principal Place of Business Mailing Address					t thetibid int tinit tidit fikan finit in	allan didizi dibin dibis bibis	81811 (881
151 SAN CARLOS BLVD 151 SAN CARLOS BLVD FT MYERS BEACH FL 33931 FT MYERS BEACH FL 33931-212							
			· · · · · · · · · · · · · · · · · · ·	***************************************	 Date Incorporated or Qualified 11/05/1990 	3a. Date of Last 6 05/01/1996	
	Place of Business	2a. Mailing Address			4. FEI Number		pplied For
Suile, Apt.	# obs	Suite, Apt. #, etc.			65-0227457	60 7E	lot Applicable Additional
22	. #, CK.	27			5. Certificate of Status Desired	, , , , , , , , , , , , , , , , , , ,	Additional Required
City & Stal	le	City & State			Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution		to Fees
7 ф	Country	Ζιρ	Count	ry	8. This corporation has liability for i		s. 199.032,
24	25		30			Yes No	
	9, Name and Address of Curre	nt Hegistered Agent		1 Name	10. Name and Address of New Re	Jistereo Agent	
	NLAN, BRIAN J.		Ľ				
151 SAN CARLOS BLVD FT MYERS BEACH FL 33931			8	2 Street Add	dress (P.O. Box Number is Not Acceptab	le)	
ri n	MIERO DEACH FL 33831		8	3			
			_			····	
			8	4 City		FL 85 Zip	Code
11. Pursuant office or agent. La	registered agent, or both, in the State am familiar with, and accept the oblig	of Florida. Such change was a lations of, Section 607.0505, Flor	uthorized rida Statut	by the corpora	rporation submits this statement for the p ation's board of directors. I hereby accep	ot the appointment as	its registered s registered
	Signature Typed or printed name of registered ag	**************************************		gent signature requ	ulred when reinstating)	DATE	00 151 40
12. 101.6	PÕ	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	Change	·
NAME	SCANLAN, BRIAN J	_	1.2 NAM				
STREET ADDRESS	3715 LIBERTY SO.			ET ADDRESS			
CITY - ST - 70°	FT. MYERS FL		1.4 CITY				
1HLF	D	DELETE 2.1				☐ Change	☐ Addition
NAME	DE LANGSDORFF, PATRICE		22 NAM	E			
STREET ADDRESS	151 SAN CARLOS BLVD		2.3 STRE	ET ADORESS			
CITY - ST - 71P	FT MYERS BEACH FL		2 4 CITY	-ST-ZIP			
HILE	D	☐ DELETE	3.1 TITLE			Change	Addition
NAME	SCANLAN, BRIAN J		3.2 NAME				
STREET ADDRESS	3715 LIBERTY SQ		3.3 STREET ADDRESS				
CHTY-ST-ZIP	FT MYERS FL	T I DOLLETE		′-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition
TIT, E		☐ DELETE	4.1 7171.1			LI triange	L. Addition
NAME COURT ASSESSED			4. 2 NAN				
STREET ADDRESS				ET ADORESS	•		
CITY - S1 - ZIP TITUE		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		, , , , , , , , , , , , , , , , , , , ,	☐ Change	Addition
NAME			5.2 NAM				
STREET ADDRESS				ET ADORESS			
CHTY - \$1 - ZIP				-ST-ZIP			
10.6		☐ DELETE	6.1 TITLE			☐ Change	Addition
NAME			6.2 NAM	E			
STREET ADDRESS			6.3 STR8	ET ADDRESS			
CHTY - ST - ZIP				-ST-ZIP			
14. Ldo here	by cert by that the information supplied	d with this filing does not qualify	for the e	xemption state	ed in Section 119.07(3)(i), Florida Statute	s. I further certify the	it the

4. For mereby coming that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. Flurther certify that the information inclicated 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

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/97 Date

Daytime Phone #

FILED

May 15 1997 8:00am

Secretary of State

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