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FILED
Aug 12 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Morison
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S31982

(9)

1. Corporation Name

BEACHMAN BEACH SERVICE, INC.

Principal Place of Business

9011 HWY 98 WEST
DESTIN FL 32541

Mailing Address

P.O. BOX 6203
DESTIN FL 32541-6203

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

BOWMAN, DEAN
9011 HWY 98 WEST
DESTIN FL 32541

3. Date Incorporated or Qualified

02/14/1991

3a. Date of Last Report

07/02/1996

4. FEI Number

59-3053801

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

10. Name and Address of New Registered Agent

31 Name

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

33

34 City

FL

35 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, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME PSTD
STREET ADDRESS BOWMAN, DEAN
CITY-ST-ZIP POST OFFICE BOX 6203 N/A
DESTIN FL 32540

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11.1 ☐ Change ☐ Addition

11.2 ME

11.3 ME

11.4 ME

11.5 ME

11.6 ME

11.7 ME

11.8 ME

11.9 ME

11.10 ME

11.11 ME

11.12 ME

11.13 ME

11.14 ME

11.15 ME

11.16 ME

11.17 ME

11.18 ME

11.19 ME

11.20 ME

11.21 ME

11.22 ME

11.23 ME

11.24 ME

11.25 ME

11.26 ME

11.27 ME

11.28 ME

11.29 ME

11.30 ME

14. I do 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.

DEAN BOWMAN

Aug 6 1997 9:47:1135

CR2E034 (9/96)