

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # S72798 (9)

1. Corporation Name

M & R BEACH SERVICES, INC.

**APPROVED
AND
FILED**

95 APR 18 PM 6:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

~~1212 BOCA CIEGA ISLE
ST. PETERSBURG FL 33706~~

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ST. PETERSBURG FL 33706~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/08/1991	3a. Date of Last Report 02/23/1994
4. FEI Number 59-3077753	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	

2. Principal Place of Business 21 201-107th AVE Suite, Apt. #, etc.	2a. Mailing Address 26 201-107th AVE. Suite, Apt. #, etc.
22 City & State 23 TREASURE ISLAND, FL	27 City & State 28 TREASURE ISLAND, FL
24 33706-4717	25 PINELLAS
29 33706-4717	30 PINELLAS

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WOODRING, ROBERT A.
1212 BOCA CIEGA ISLE
ST. PETERSBURG, BEACH, FL 33706**

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

(Signature of Agent or Registered Agent or New Registered Agent)

(Signature of Registered Agent or New Registered Agent)

(Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE PO	1. NAME WOODRING, ROBERT A.	1. TITLE PO	1. NAME MELISSA C. WIDNER
2. STREET ADDRESS 1212 BOCA CIEGA ISLE	2. STREET ADDRESS ST. PETE, BCH FL	2. STREET ADDRESS 7300-12th AVE NO.	2. STREET ADDRESS ST. PETERSBURG, FL. 33710
3. CITY, ST, ZIP ST. PETE, BCH FL	3. CITY, ST, ZIP ST. PETE, BCH FL	3. CITY, ST, ZIP ST. PETE, BCH FL	3. CITY, ST, ZIP ST. PETERSBURG, FL. 33710
4. TITLE STD	4. NAME WOODRING, CHRISTINA	4. TITLE STD	4. NAME KENNETH J. WIDNER
5. STREET ADDRESS 1212 BOCA CIEGA ISLE	5. STREET ADDRESS ST. PETE, BCH FL	5. STREET ADDRESS 7300-12th AVE NO.	5. STREET ADDRESS ST. PETERSBURG, FL. 33710
6. CITY, ST, ZIP ST. PETE, BCH FL	6. CITY, ST, ZIP ST. PETE, BCH FL	6. CITY, ST, ZIP ST. PETERSBURG, FL. 33710	6. CITY, ST, ZIP
7. TITLE	7. NAME	7. TITLE	7. NAME
8. STREET ADDRESS	8. STREET ADDRESS	8. STREET ADDRESS	8. STREET ADDRESS
9. CITY, ST, ZIP	9. CITY, ST, ZIP	9. CITY, ST, ZIP	9. CITY, ST, ZIP
10. TITLE	10. NAME	10. TITLE	10. NAME
11. STREET ADDRESS	11. STREET ADDRESS	11. STREET ADDRESS	11. STREET ADDRESS
12. CITY, ST, ZIP	12. CITY, ST, ZIP	12. CITY, ST, ZIP	12. CITY, ST, ZIP
13. TITLE	13. NAME	13. TITLE	13. NAME
14. STREET ADDRESS	14. STREET ADDRESS	14. STREET ADDRESS	14. STREET ADDRESS
15. CITY, ST, ZIP	15. CITY, ST, ZIP	15. CITY, ST, ZIP	15. CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information submitted 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

(Signature and Typed or Printed Name of Signing Officer or Director)

MELISSA WIDNER X

(Date)

(Typed Name)