FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 19 AM 9:44

DOCUMENT # **S77614** **(3)**

1. Corporation Name

AT THE BEACH REALTY INC.

Principal Place of Business	Mailing Address
4320 A1A SOUTH SUITE 8 ST AUGUSTINE FL 32084	4320 A1A SOUTH SUITE 8 ST AUGUSTINE FL 32084

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/04/1991
3a. Date of Last Report: 01/25/1994
4. FEI Number: 59-3080927 [ ] 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 [X] Yes [ ] No

2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) / Country (25)	Zip (29) / Country (30)

9. Name and Address of Current Registered Agent

MORER, GEORGE J
4320 A1A SOUTH
SUITE 8
ST. AUGUSTINE FL 32084

10. Name and Address of New Registered Agent

81 Name: Morar, George Jr.
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 ______ DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P/M — [X] Change [ ] Addition
NAME	MORER, GEROGE J	1.2 NAME	Morar, George Jr.
STREET ADDRESS	654 ANDREW AVENUE	1.3 STREET ADDRESS	
CITY-ST-ZIP	ST. AUGUSTINE FL	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	[X] Change [ ] Addition
NAME	SEYBOLD, MICHAEL	2.2 NAME	DELETE
STREET ADDRESS	9 VESSAGI DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	ST. AUGUSTINE FL	2.4 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	[ ] Change [ ] Addition
NAME	VETTER, PAUL	3.2 NAME	
STREET ADDRESS	530 W TROPIC WAY	3.3 STREET ADDRESS	
CITY-ST-ZIP	ST. AUGUSTINE FL	3.4 CITY-ST-ZIP	
TITLE	S	4.1 TITLE	[ ] Change [ ] Addition
NAME	CHAPMAN, CINDY	4.2 NAME	
STREET ADDRESS	4212 OAK LANE	4.3 STREET ADDRESS	
CITY-ST-ZIP	ST. AUGUSTINE FL	4.4 CITY-ST-ZIP	
TITLE	T	5.1 TITLE	[ ] Change [ ] Addition
NAME	KALMUN, LEE	5.2 NAME	
STREET ADDRESS	544 WOODCHASE DRIVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	ST. AUGUSTINE FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	V — [ ] Change [X] Addition
NAME		6.2 NAME	John Kirkpatrick
STREET ADDRESS		6.3 STREET ADDRESS	22 Deanna Dr.
CITY-ST-ZIP		6.4 CITY-ST-ZIP	St. Augustine, FL 32084

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(1)(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.

SIGNATURE: George Morar, Jr. — 1-12-95 — 471-2100 (904)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — Daytime Phone #

GEORGE MORAR, JR

CP