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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V01994

(5)

BEACH REAL ESTATE, INC.

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FILED

May 19 1997 8:00am

Secretary of State

Principal Place of Business Mailing Address 14129 U.S. HIGHWAY 19 14129 U.S. HIGHWAY 19 HUDSON FL 34867 HUDSON FL 34667-1168 3a. Date of Last Report 3. Date Incorporated or Qualified 04/12/1996 12/20/1991 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-3097607 Not Applicable 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 🗌 Yos 🔲 No Florida Statutes 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name PANESON, DARLENE 14129 U.S. HIGHWAY 19 82 Street Address (P.O. Box Number is Not Acceptable) **HUDSON FL 34667** 83 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Ftorida 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 Ftorida. 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 reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS Change Addition DELETE 1.1 TITLE DVP TITLE PANESON, DARLENE 1.2 NAM8 NAME 14129 U.S. HIGHWAY 19 1.3 STREET ADDRESS STREET ADDRESS **HUDSON FL** 1,4 CITY-ST-7IP CITY-ST-ZIP Addition DELETE Change 21 TITLE TITLE PANESON, DARLENE 2.2 NAME NAME 14129 U.S. HIGHWAY 19 2.3 STREET ADDRESS STREET ADDRESS HUDSON FL 2. 4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADORESS STREET ADDRESS 3.4. CITY - \$1 - ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITL€ 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 51 TITLE TITLE 52 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CH1Y-S1-7IP ☐ Change ■ Addition DELETE 61111LF TITLE 6.2 NAME NAME **6.3 STREET ADDRESS** STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

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.