#### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9600000327

Entity Name: BEACHES HOSPITALITY NETWORK, INC.

FILED
Mar 22, 2016
Secretary of State
CC5726165797

## **Current Principal Place of Business:**

C/O ROB NICHOLSON 3948 THIRD STREET SOUTH STE. 130 JACKSONVILLE BCH, FL 32250

# **Current Mailing Address:**

C/O ROB NICHOLSON 3984 THIRD STREET SOUTH STE. 130 JACKSONVILLE BEACH, FL 32250 US

FEI Number: 59-3358152 Certificate of Status Desired: No

#### Name and Address of Current Registered Agent:

NICHOLSON, ROBERT 3948 THIRD STREET SOUTH STE. 130 JACKSONVILLE BEACH, FL 32250 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ROBERT NICHOLSON 03/22/2016

Electronic Signature of Registered Agent Date

### Officer/Director Detail:

 Title
 PRESIDENT
 Title
 VP, TREASURER

 Name
 NICHOLSON, ROBERT
 Name
 BRADSHAW, PATRICIA

Address 3948 THIRD STREET SOUTH Address 400 E. BAY STREET

STE. 130 #210

City-State-Zip: JACKSONVILLE BEACH FL 32250 City-State-Zip: JACKSONVILLE BEACH FL 32202

Title SECRETARY
Name WEBB, KORTNEY

Address 119 PABLO POINT DRIVE City-State-Zip: JACKSONVILLE FL 32225

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing Officer/Director Detail