

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000004521

**FILED**  
**Jan 10, 2014**  
**Secretary of State**  
**CC5606969098**

**Entity Name:** SPECIAL EVENTS FOR MEXICO BEACH, INC.

**Current Principal Place of Business:**

102 CANAL PARKWAY  
MEXICO BEACH, FL 32456

**Current Mailing Address:**

P O BOX 13382  
MEXICO BEACH, FL 32410

**FEI Number: 59-3643163**

**Certificate of Status Desired: No**

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

SHOAF, KIMBERLY P  
102 CANAL PARKWAY  
MEXICO BEACH, FL 32456 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           VPC  
Name           SHOAF, KIMBERLY P  
Address        PO BOX 13382  
City-State-Zip: MEXICO BEACH FL 32410

Title           OTHER  
Name           MCINNIS, SANDY  
Address        PO BOX 13382  
City-State-Zip: MEXICO BEACH FL 32410

Title           VPC  
Name           SHAWNA, WOOD  
Address        P.O. BOX 13382  
City-State-Zip: MEXICO BEACH FL 32410

Title           OTHER  
Name           WOOD, PEGGY  
Address        P O BOX 13382  
City-State-Zip: MEXICO BEACH FL 32410

*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.*

**SIGNATURE: KIMBERLY P SHOAF**

**VCP**

**01/10/2014**

Electronic Signature of Signing Officer/Director Detail

Date