

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04535

**Entity Name:** BEACH FAMILY CONDO, INC.

**Current Principal Place of Business:**

6213 THOMAS DRIVE  
#603  
PANAMA CITY BEACH, FL 32407

**Current Mailing Address:**

PO BOX 1116  
THOMASVILLE, GA 31799-1116 US

**FEI Number:** 58-1588312

**Certificate of Status Desired:** No

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

ALLEN, M.H.  
6213 THOMAS DRIVE  
PANAMA CITY, FL 32407 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 P  
Name ALLEN, MH  
Address 114 PONY CIRCLE  
City-State-Zip: THOMASVILLE GA 31792

Title S  
Name ALLEN, KATHY  
Address 114 PONY CIRCLE  
City-State-Zip: THOMASVILLE GA 31792

Title VP  
Name ALLEN, ABBEY L  
Address 114 PONY CIRCLE  
City-State-Zip: THOMASVILLE GA 31792

Title VP  
Name ALLEN, KARI M  
Address 14 PONY CIRCLE  
City-State-Zip: THOMASVILLE GA 31792

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MH ALLEN

**PRESIDENT**

**03/17/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date