

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000140672

FILED  
Jan 13, 2006  
Secretary of State

Entity Name: BEACH SPA MANAGEMENT COMPANY

## Current Principal Place of Business:

1490 PINE ISLAND RD  
UNIT 4F  
CAPE CORAL, FL 33909

## New Principal Place of Business:

278 LOWELL AVENUE  
NORTH FORT MYERS, FL 33917 40

## Current Mailing Address:

P O BOX 3998  
N FT MYERS, FL 33918

## New Mailing Address:

FEI Number: 20-3538208      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

POMEROY, KATHLEEN  
278 LOWELL AVE  
N FT MYERS, FL 33917 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: POMEROY, KATHLEEN  
Address: 278 LOWELL AVE  
City-St-Zip: N FT MYERS, FL 33917

Title: D ( ) Delete  
Name: FITZGERALD, JENNIFER  
Address: 278 LOWELL AVE  
City-St-Zip: N FT MYERS, FL 33917

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KATHLEEN POMEROY

D

01/13/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date