

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 14, 2009
Secretary of State**

DOCUMENT# 724912

Entity Name: BEACH VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2625 SOUTH ATLANTIC AVENUE
COCOA BEACH, FL 32931

New Principal Place of Business:

Current Mailing Address:

204 W COCOA BEACH PKWY
COCOA BEACH, FL 32931

New Mailing Address:

FEI Number: 59-1457593 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KELDORFF, INC
DBA SHOWCASE PROP MGMT
204 W COCOA BEACH CSWY
COCOA BEACH, FL 32931 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

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: FITZGERALD, JUDY
Address: 92 SUSAN D
City-St-Zip: WESTFIELD, MA 01085

Title: SD () Delete
Name: FREEMAN, SUE
Address: 21 CASCADE RD
City-St-Zip: ARNOLD, MD 21012

Title: D () Delete
Name: CARSON, JAMES
Address: 108 JAMAICA DR
City-St-Zip: COCOA BEACH, FL 32931

Title: D () Delete
Name: ALLEN, MARY
Address: PO BOX 223
City-St-Zip: WINDERMERE, FL 34786

Title: P () Delete
Name: CARSON, ALYCE
Address: 2023 N ATLANTIC AVE #133
City-St-Zip: COCOA BEACH, FL 32931

Title: D () Delete
Name: AURAND, JOYCE
Address: 7231 E TROPICAL WAY
City-St-Zip: PLANTATION, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KAREN E. GUNN-BARDOT

MS.

04/14/2009

Electronic Signature of Signing Officer or Director

Date