

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

1996-4-30-96

B- 5156 C

DOCUMENT # 726895 (6)

1. Corporation Name  
**BEACON 21 CONDOMINIUM "F" ASSOCIATION, INC.**



Principal Place of Business: 1511 NE 12TH TERR. BEACON 21. JENSEN BEACH FL 34957  
Mailing Address: 1511 NE 12TH TERR. BEACON 21. JENSEN BEACH FL 34957

3. Date Incorporated or Qualified: 07/09/1973  
3a. Date of Last Report: 03/28/1995

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	59-1514577	Not Applicable
Suite, Apt. #, etc	Suite, Apt. #, etc.	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
22	27	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
City & State	City & State	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No
23	28		
Zip	Country		
24	25		
	29		
	30		

9. Name and Address of Current Registered Agent

~~FARINA, CHARLES~~  
~~1511 NE 12 TERRACE~~  
~~JENSEN BEACH FL 33457~~

10. Name and Address of New Registered Agent

81 Name: Judith A Kenney  
82 Street Address (P.O. Box Number is Not Acceptable): 1943 NE DIXIE Hwy  
83: Jensen Bch  
84 City: Jensen Bch  
85 Zip Code: FL 34957

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: *Judith A Kenney* Judith A. Kenney, Mgr. DATE: 4-23-96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KULLBERG, AILEEN	1.2 NAME:	ROBERT DIETZ
STREET ADDRESS	1511 NE 12TH TERRACE-	1.3 STREET ADDRESS:	1511 NE 12TH TERR
CITY-ST-ZIP	JENSEN BEACH FL	1.4 CITY-ST-ZIP	JENSEN Bch, FL
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SAVEWITZ, EDW.	2.2 NAME:	
STREET ADDRESS	1511 NE 12TH TERRACE	2.3 STREET ADDRESS:	
CITY-ST-ZIP	JENSEN BEACH FL	2.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SWENSEN, EVELYN	3.2 NAME:	
STREET ADDRESS	1511 NE 12TH TERRACE	3.3 STREET ADDRESS:	
CITY-ST-ZIP	JENSEN BEACH FL	3.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CLEARY, VERONICA	4.2 NAME:	
STREET ADDRESS	1511 NE 12TH TERRACE	4.3 STREET ADDRESS:	
CITY-ST-ZIP	JENSEN BEACH FL	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCLEOD, CHARLES J	5.2 NAME:	
STREET ADDRESS	1511 NE 12TH TERR., F16	5.3 STREET ADDRESS:	
CITY-ST-ZIP	JENSEN BEACH FL	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME:	
STREET ADDRESS		6.3 STREET ADDRESS:	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Robert W. Dietz* Robert W. Dietz DATE: 4-23-96

CR2E037 (12/95)