2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE

Feb 16, 2004 8:00 am **DOCUMENT # 744977 Secretary of State** 1. Entity Name 02-16-2004 90054 008 ****61.25 BEACHPLACE ASSOCIATION, INC. Principal Place of Business Mailing Address 1109 GULF OF MEXICO DRIVE LONGBOAT KEY FL 34228 1109 GULF OF MEXICO DRIVE LONGBOAT KEY FL 34228 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) MOORE City & State City & State Applied For 4. FEI Number 59-1936363 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MCFARLANE, ROBERT Street Address (P.O. Box Number is Not Acceptable) 1109 GULF OF MEXICO DR. LONGBOAT KEY FL 34228 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE **⊠** Delete TITLE Change X Addition KESSLER, BEN NAME NAME Larry Schneirov 1065 Gulf of Mexico Dr. #404 1115 GULF OF MEXICO DR. #303 STREET ADDRESS STREET ADDRESS LONGBOAT KEY FL 34228 CFTY-ST-ZIP CITY-ST-ZIP Longboat Key, F1 34228 SD TITLE ☐ Delete TITLE ☐ Change ★ Addition LEVY MELVIN NAME NAME Norman Asher 1085 FULF T MEXICO DR. #204 STREET ADDRESS STREET ADDRESS 1135 Gulf of Mexico Dr. #404 LONGBOAT KEY FL CITY-ST-ZIP CITY-ST-ZIP Longobat Key, Fl 34228 TITLE Delete TITLE Change Addition BECKER, DAVID NAME NAME Herbert Fisher 1075 GULF OF MEXICO DR #504 STREET ADDRESS STREET ADDRESS 1075 Gulf of Mexico Dr. #604 LONGBOAT KEY FL CITY-ST-ZIP CITY-ST-ZIP Longobat Key, Fl 34228 TITLE M Delete **Addition** DENNEBAUM, PAUL NAME, NAME John Brouder 1085 GULF OF MEXICO DR. #603 STREET ADDRESS STREET ADDRESS 1115 Gulf of Mexico Dr. #505 LONGBOAT KEY FL CITY-ST-ZIP CITY-ST-7IP Longboat Key, FL 34228 THIE ☐ Change ☐ Addition TITLE ☐ Delete MAZZIOTTI, ANTHONY NAME NAME 1105 GULF OF MEXICO DR. #101 STREET ADDRESS STREET ADDRESS LONGBOAT KEY FL 34228 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Addition nn F Delete KEELIN, JOHN NAME NAME 1055 GULF OF MEXICO DRIVE 602 STREET ADDRESS STREET ADDRESS LONGBOAT KEY FL 34228 CITY-ST-ZIP CITY-ST-ZIP I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 repeiver of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an apachgrant with an addjess, with all other like empowered.

ED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED