

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744994

FILED
Feb 04, 2006
Secretary of State

Entity Name: BEACH GARDEN "H" ASSOCIATION, INC.

Current Principal Place of Business:

109 INAGUA LANE
BONITA SPRINGS, FL 34134 US

New Principal Place of Business:

Current Mailing Address:

109 INAGUA LANE
BONITA SPRINGS, FL 34134 US

New Mailing Address:

FEI Number: 59-2474386 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOYD, SUSAN
109 INAGUA LANE
BONITA SPRINGS, FL 34134 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: PD () Delete
Name: CARKHUFF, WALDO H
Address: 108 HISPANIOLA LN
City-St-Zip: BONITA SPRINGS, FL 34134

Title: TD () Delete
Name: STINGL, DAN
Address: 227 BAREFOOT BEACH BLVD
City-St-Zip: BONITA SPRINGS, FL 34134

Title: SD () Delete
Name: LOYD, SUSAN
Address: 109 INAGUA LN
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VD () Delete
Name: LOYD, PHIL
Address: 109 INAGUA LN
City-St-Zip: BONITA SPRINGS, FL 34134

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

SIGNATURE: SUSAN LOYD

Electronic Signature of Signing Officer or Director

TREA

02/04/2006

Date