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May 20 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **760733** **(6)**

1. Corporation Name

BEAUMER CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
801 RIVER POINT DRIVE P. O. BOX 10579 NAPLES FL 33941-7579	~~P.O. BOX 10579~~ ~~NAPLES FL 34101-0579~~ ~~US~~ c/o R+P Property Management 265 Airport Rd South Naples, FL 34104

2. Principal Place of Business 21	2a. Mailing Address 26 c/o R+P Property Management	3. Date Incorporated or Qualified 11/17/1981	3a. Date of Last Report 05/01/1996
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 265 Airport Rd, South	4. FEI Number 59-2237949	☐ Applied For ☐ Not Applicable
City & State 23	City & State 28 Naples	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
Zip / Country 24 / 25	Zip / Country 29 34104 / 30 Collier	6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
~~BANTZ-THOMAS, M~~ ~~COLLIER FINANCIAL SYSTEMS INC~~ ~~4985 E TAMIAMI TRAIL~~ ~~NAPLES FL 33962~~	81 Name: R+P Property Management 82 Street Address (P.O. Box Number is Not Acceptable): 265 Airport Rd, South 83 84 City: Naples FL 85 Zip Code: 34104

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: Dennis Carroll — 5/12/97
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE		☒ Change ☐ Addition
NAME	~~BEAZER, CAROLE~~		1.2 NAME	BEAZER, CAROLE	
STREET ADDRESS	~~RR #2, BOX 32~~		1.3 STREET ADDRESS	801 River Point DR, #207A	
CITY-ST-ZIP	~~HUNTSVILLE ONT CA~~		1.4 CITY-ST-ZIP	Naples, FL 34102	
TITLE	DVPT	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	ROSS, TISCI		2.2 NAME		
STREET ADDRESS	RD#2, BOX 149, BURTIS PT		2.3 STREET ADDRESS		
CITY-ST-ZIP	AUBURN NY		2.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	GRUSZKA, JAMES		3.2 NAME		
STREET ADDRESS	807 RIVERPOINT DR STE 103 D		3.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL		3.4 CITY-ST-ZIP		
TITLE	SD	☒ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	JUDITH LYTE		4.2 NAME		
STREET ADDRESS	11 NARROWS RD		4.3 STREET ADDRESS		
CITY-ST-ZIP	NARRAGANSETT RI		4.4 CITY-ST-ZIP		
TITLE	~~D~~	☐ DELETE	5.1 TITLE	SD	☒ Change ☐ Addition
NAME	NORMAN H. ROBBINS		5.2 NAME		
STREET ADDRESS	2537 CORNELL DR		5.3 STREET ADDRESS		
CITY-ST-ZIP	LAPEER MI		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

941-793-3148

SIGNATURE: Carole Beazer RECEIVED Carole Beazer — President — 4/14/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0059325