2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2008
Secretary of State

DOCUMENT# 760733

Entity Name: BEAUMER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

801 RIVER POINT DRIVE
P. O. BOX 10579
NAPLES, FL 34102

New Principal Place of Business:

Current Mailing Address:

C/O R & P PROPERTY MANAGEMENT
265 AIRPORT RD, SOUTH
NAPLES, FL 34104 US

New Mailing Address:

FEI Number: 59-2237949 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

R&P PROPERTY MANAGEMENT
265 AIRPORT RD, SOUTH
NAPLES, FL 34104 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:	D	( ) Delete
Name:	VAN LOON, JOHN	
Address:	807 RIVER POINT DRIVE #401 D	
City-St-Zip:	NAPLES, FL 34102	
Title:	TD	( ) Delete
Name:	MCVAY, PETE	
Address:	805 RIVER POINT DR #101 C	
City-St-Zip:	NAPLES, FL 34102	
Title:	SD	( ) Delete
Name:	SHORT, NANCY	
Address:	2191 TARPON RD	
City-St-Zip:	NAPLES, FL 34102	
Title:	VPD	( ) Delete
Name:	MCDONNELL, TERRY	
Address:	447 CHURCH RD	
City-St-Zip:	DEVON, PA 19333	
Title:	PD	( ) Delete
Name:	ROBBINS, NORMAN	
Address:	805 RIVER POINT DRIVE #308 C	
City-St-Zip:	NAPLES, FL 34102	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	PD	(X) Change ( ) Addition
Name:	MCCARTHY, TOM	
Address:	284 HERWORTH DRIVE	
City-St-Zip:	CHESTERFIELD, MO 63005	
Title:	D	(X) Change ( ) Addition
Name:	BOCZER, BILL	
Address:	9 FIRESIDE COURT	
City-St-Zip:	NORWALK, CT 06850	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	TD	(X) Change ( ) Addition
Name:	ROBBINS, NORMAN	
Address:	805 RIVER POINT DRIVE #308 C	
City-St-Zip:	NAPLES, FL 34102	

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: TOM MCCARTHY PD 03/10/2008

Electronic Signature of Signing Officer or Director — Date