2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000005086

FILED Apr 27, 2005 Secretary of State

Entity Name: BEACHWAY AT NASSAU LAKE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:	New Principal Place of Business:

463499 SR 200 YULEE, FL 33097

Current Mailing Address: New Mailing Address:

P.O. BOX 1987 YULEE, FL 320411987

FEI Number: 59-3662757 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

POWELL, TERRELL J 463499 SR 200 YULEE, FL 32097 US

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:

Clastrania Ciarachura of Danistana d'Anant

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition

 Name:
 AHL, WILLIAM L
 Name:

 Address:
 96061 INLET COVE CT
 Address:

 City-St-Zip:
 FERNANDINA BEACH, FL 32034
 City-St-Zip:

Title: SD () Delete Title: ST (X) Change () Addition

Name: FAULK, ERIC Name: GASKILL, GARY

Address: 9681 CAUSEWAY PLACE Address: 966 S PARLIAMENT DR

City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip: FERNANDINA BEACH, FL 32034

Title: TD () Delete Title: D (X) Change () Addition

 Name:
 GASKILL, GARY
 Name:
 DRAKE, PAUL D

 Address:
 966 SO PARLIAMENT DR
 Address:
 96842 ARRIGO DR

Address: 966 SO PARLIAMENT DR Address: 96842 ARRIGO DR
City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip: FERNANDINA BEACH, FL 32034

I hereby certify that the information supplied with this filing does not qualify for the 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 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: TERRELL J POWELL RA 04/27/2005