

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 26, 2001 8:00 am
Secretary of State

01-26-2001 90078 013 ****61.25

DOCUMENT # N03273

1. Entity Name

2720 BEACH ROAD CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

2720 N. BEACH RD., #4
 ENGLEWOOD FL 34223-9118
 US

Mailing Address

60 KALAMAZOO AVENUE
 SOUTH HAVEN MI 49090
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0227995

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ISAIA, JOHN
2720 N BEACH ROAD
UNIT #4
ENGLEWOOD FL 34223

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: PD
 NAME: ISAIA, JOHN Delete
 STREET ADDRESS: 2720 N BEACH RD #4
 CITY-ST-ZIP: ENGLEWOOD FL

TITLE: Change Addition
 NAME: _____
 STREET ADDRESS: _____
 CITY-ST-ZIP: _____

TITLE: SD
 NAME: JENNEY, CAROLE Delete
 STREET ADDRESS: 2720 N BEACH RD #5
 CITY-ST-ZIP: ENGLEWOOD FL

TITLE: Change Addition
 NAME: _____
 STREET ADDRESS: _____
 CITY-ST-ZIP: _____

TITLE: VD Delete
 NAME: ECKERFIELD, ROGER
 STREET ADDRESS: 2720 N BEACH ROAD, #6
 CITY-ST-ZIP: ENGLEWOOD FL

TITLE: VD Change Addition
 NAME: John Flink
 STREET ADDRESS: 2720 N. BEACH RD, #1
 CITY-ST-ZIP: ENGLEWOOD, FL

TITLE: TD Delete
 NAME: JENNEY, GEORGE
 STREET ADDRESS: 2720 N BEACH RD #5
 CITY-ST-ZIP: ENGLEWOOD FL

TITLE: Change Addition
 NAME: _____
 STREET ADDRESS: _____
 CITY-ST-ZIP: _____

TITLE: Delete
 NAME: _____
 STREET ADDRESS: _____
 CITY-ST-ZIP: _____

TITLE: Change Addition
 NAME: _____
 STREET ADDRESS: _____
 CITY-ST-ZIP: _____

TITLE: Delete
 NAME: _____
 STREET ADDRESS: _____
 CITY-ST-ZIP: _____

TITLE: Change Addition
 NAME: _____
 STREET ADDRESS: _____
 CITY-ST-ZIP: _____

12. I 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 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 receiver or 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 attachment with an address, with all other like empowered.

SIGNATURE: _____

John P. Isaia
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 1/15/01 Daytime Phone #: 616-637-1620

CP2E037 (10/00)