2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2009
Secretary of State

DOCUMENT# N04000000306

Entity Name: GARDENS AT BEACHWALK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

711 TARPON BAY RD
SANIBEL, FL 33957

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 100
SANIBEL, FL 33957

New Mailing Address:

FEI Number: 20-0659408 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MACKESY, STEVEN
711 TARPON BAY RD
SANIBEL, FL 33957 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: TD ( ) Delete
Name: RUSSO, TOM
Address: 21 KATHERINE PLACE
City-St-Zip: OAKADLE, NY 11769

Title: P ( ) Delete
Name: HORGAN, JOHN
Address: 15645 OCEANWALK LN #2316
City-St-Zip: FORT MYERS, FL 33908

Title: SD ( ) Delete
Name: ARNDT, MARY
Address: 394 FAIRMONT AVE
City-St-Zip: N TONAWANDA, NY 14120

Title: VD ( ) Delete
Name: FRANSON, BRUCE
Address: 1875 138TH ST
City-St-Zip: BALSAM LAKE, WI 54810 CA

Title: D ( ) Delete
Name: DAPPER, RICHARD
Address: 38 WOODYCREST DR
City-St-Zip: PITTSBURGH, PA 15234

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: RUSSO, TOM
Address: 21 KATHERINE PLACE
City-St-Zip: OAKDALE, NY 11769

Title: TD (X) Change ( ) Addition
Name: ROVERE, ITALO
Address: 15999 MANDOLIN BAY DR 206
City-St-Zip: FORT MYERS, FL 33908

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 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 RUSSO PD 04/09/2009
Electronic Signature of Signing Officer or Director — Date