


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 05, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N39087</b> 1. Entity Name <b>BEACHSIDE NEIGHBORHOOD WATCH, INC.</b>		
Principal Place of Business <b>46 S. OLEANDER AVE DAYTONA BEACH FL 32118</b>		Mailing Address <b>P.O. BOX 263201 DAYTONA BEACH FL 32118</b>
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.	
City & State	City & State	
Zip	Country	Zip
Country	4. FEI Number <b>59-3026450</b>	
5. Certificate of Status Desired <input type="checkbox"/>		Applied For <input type="checkbox"/> Not Applicable



1st MOORE CR2E037 (10/06)

<b>6. Name and Address of Current Registered Agent</b>  <b>HECKMAN, FRANK P 46 S. OLEANDER AVE DAYTONA BEACH FL 32118</b>	<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b> Zip Code</span>
---	--

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2007</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>  <b>Make Check Payable to Florida Department of State</b>
--	--	--

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	C HECKMAN, FRANK P 46 S. OLEANDER AVE DAYTONA BEACH FL 32118	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition  U00000656367 03/14/07-80032-019 61.25
NAME	VC LANE, WILLIAM B 435 N. GRANDVIEW AVE. DAYTONA BEACH FL 32118	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	VCS STEPHENS, BETTY 1494 N PENNINSULA DR DAYTONA BEACH FL 32118	STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-ST-ZIP	T BROWN, VIRGINIA 1 BRADOCK AVE DAYTONA BEACH FL 32118	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-ST-ZIP	<input type="checkbox"/> Delete	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-ST-ZIP	<input type="checkbox"/> Delete	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-ST-ZIP	<input type="checkbox"/> Delete	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: Frank P. Heckman **FRANK P. HECKMAN** (386) 255-4976