

FILE NOW: FILING FEE IS \$61.25

FILED  
Feb 03 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N42086 (1)**  
1. Corporation Name  
**BEACH COTTAGES III CONDOMINIUM ASSOCIATION, INCORPORATED**



Principal Place of Business C/O PAREKH. COMMONS & CO 2700 EAST BAY DR., #107 LARGO FL 33771 US	Mailing Address C/O PAREKH. COMMONS & CO. 2700 EAST BAY DR., #107 LARGO FL 34641 US
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3. Date Incorporated or Qualified  
**02/14/1991**

4. FEI Number **59-3048276**  
Applied For  Not Applicable

2. Principal Place of Business  
21

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

Suite, Apt. #, etc. 26

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

City & State 27

7. Is this nonprofit corporation a homeowners association?  Yes  No

Zip 28

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

Country 29 **33771** 30

9. Name and Address of Current Registered Agent  
**WEAVER, ALBERT**  
**18450 GULF BLVD. 208**  
**SUITE 305 208**  
**INDIAN SHORES FL 33785**

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NORRIS, KENNETH	1.2 NAME	
STREET ADDRESS	18450 GULF BLVD., #209	1.3 STREET ADDRESS	
CITY-ST-ZIP	INDIAN SHORES FL	1.4 CITY-ST-ZIP	<b>33785</b>
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROCHFORD, JAMES	2.2 NAME	
STREET ADDRESS	2232 100TH AVENUE	2.3 STREET ADDRESS	
CITY-ST-ZIP	DRESSER WI	2.4 CITY-ST-ZIP	<b>54009</b>
TITLE	VPD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PARKE, ROY	3.2 NAME	
STREET ADDRESS	3719 TANNER RD	3.3 STREET ADDRESS	
CITY-ST-ZIP	DOVER FL	3.4 CITY-ST-ZIP	<b>33527</b>
TITLE	DT <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SEUBERT, PAUL	4.2 NAME	
STREET ADDRESS	1125 SPRINGHILL DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	MISSISSAUGA ON	4.4 CITY-ST-ZIP	<b>CAN LSH IN2</b>
TITLE	DS <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WEAVER, ALBERT	5.2 NAME	
STREET ADDRESS	18450 GULF BLVD 208	5.3 STREET ADDRESS	
CITY-ST-ZIP	INDIAN SHORES FL	5.4 CITY-ST-ZIP	<b>33785</b>
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Paul A. Seubert **RECEIVED** Jan 20, 1998 (416)236-5395

CR2E037 (10/97)