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**Secretary of State**

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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # N94000002161

1. Corporation Name

THE BELLEAIR BEACH GULFSIDE CIVIC ASSOCIATION, INC.

Principal Place of Business

2900 GULF BLVD  
 BELLEAIR BEACH FL 33786  
 US

Mailing Address

2900 GULF BLVD  
 BOX 315  
 BELLEAIR BEACH FL 33786-3521  
 US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

04/28/1994

4. FEI Number  
 59-3247965

Applied For  
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

RODGERS, ANDREW C  
 2900 GULF BLVD #205  
 BELLEAIR BEACH FL 33786

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	T	DELETED
NAME	ROBERT M. KOCH	
STREET ADDRESS	2100 GULF BLVD. #2	
CITY-ST-ZIP	BELLEAIR BEACH FL	
TITLE	D	DELETED
NAME	SCOTT, STUART C	
STREET ADDRESS	3100 GULF BLVD, # 123	
CITY-ST-ZIP	BELLEAIR BEACH FL	
TITLE	TD	DELETED
NAME	PETERS, CYNTHIA	
STREET ADDRESS	2500 GULF BLVD, # 105-A	
CITY-ST-ZIP	BELLEAIR BEACH FL	
TITLE	P	DELETED
NAME	MOORE, DON A	
STREET ADDRESS	3400 GULF BLVD #306	
CITY-ST-ZIP	BELLEAIR BEACH FL	
TITLE	S	DELETED
NAME	RODGERS, ANDREW C	
STREET ADDRESS	2900 GULF BLVD #205	
CITY-ST-ZIP	BELLEAIR BEACH FL	
TITLE	D	DELETED
NAME	SCHRIEFER, HERMAN F	
STREET ADDRESS	2500 GULF BLVD #205A	
CITY-ST-ZIP	BELLEAIR BEACH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	T	Change	Addition
1.2 NAME	WILLIAM R GREGORY		
1.3 STREET ADDRESS	3500 GULF BLVD #C-214		
1.4 CITY-ST-ZIP	BELLEAIR BEACH FL 33786		
2.1 TITLE	D	Change	Addition
2.2 NAME	RICHARD S CLARKE		
2.3 STREET ADDRESS	2450 GULF BLVD #4B		
2.4 CITY-ST-ZIP	BELLEAIR BEACH FL 33786		
3.1 TITLE	D	Change	Addition
3.2 NAME	MIKE TOWRY		
3.3 STREET ADDRESS	2700 GULF BLVD		
3.4 CITY-ST-ZIP	BELLEAIR BEACH FL 33786		
4.1 TITLE	D	Change	Addition
4.2 NAME	NANCY STEGURA		
4.3 STREET ADDRESS	3420 GULF BLVD		
4.4 CITY-ST-ZIP	BELLEAIR BEACH FL 33786		
5.1 TITLE	D	Change	Addition
5.2 NAME	JIM CULP		
5.3 STREET ADDRESS	2100 GULF BLVD #18		
5.4 CITY-ST-ZIP	BELLEAIR BEACH FL 33786		
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
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)(i), 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, with all other like empowered.

SIGNATURE:

*[Signature]*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RODGERS, PRES.

5-14-99

727/595-6729

CR2E037 (1/98)