

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 27, 2009  
Secretary of State**

DOCUMENT# N99000007117

Entity Name: HAWAIIAN INN BEACH RESORT CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1326 S. RIDGEWOOD AVE.  
#14  
DAYTONA BEACH, FL 32114

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 214220  
SOUTH DAYTONA, FL 32121

**New Mailing Address:**

FEI Number: 59-3575262      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

CLIFTON, RONALD D JR.  
1326 S. RIDGEWOOD AVE.  
#14  
DAYTONA BEACH, FL 32114 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: D ( ) Delete  
Name: JAMES, MOVES  
Address: 6465 CYPRESS SPRING PKWY  
City-St-Zip: PORT ORANGE, FL 32128

Title: VP ( ) Delete  
Name: RENSLOW, TERI  
Address: W 10795 875 AVE  
City-St-Zip: RIVER FALLS, WI 54022

Title: T ( ) Delete  
Name: MCDONALD, RODNEY  
Address: 612 WARWICK LANE  
City-St-Zip: CRANBERRY TWP, PA 16066

Title: DS ( ) Delete  
Name: BOWDON, SALLY  
Address: 848 MYRTLE VIEW DR.  
City-St-Zip: BATON ROUGE, LA 70810

Title: DP ( ) Delete  
Name: PACE, RIC  
Address: W 10209 866 ACE  
City-St-Zip: RIVER FALLS, WI 54022

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: SHARBER, KATHY  
Address: 700 MORELAND DRIVE  
City-St-Zip: MT. JULIET, TN 37221 US

Title: DVP (X) Change ( ) Addition  
Name: RENSLOW, TERI  
Address: W 10795 875 AVE  
City-St-Zip: RIVER FALLS, WI 54022

Title: DT (X) Change ( ) Addition  
Name: MCDONALD, RODNEY  
Address: 612 WARWICK LANE  
City-St-Zip: CRANBERRY TWP, PA 16066

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: RIC PACE

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

DP

02/27/2009

\_\_\_\_\_  
Date