

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003567

FILED
Apr 30, 2006
Secretary of State

Entity Name: BEACH POINTE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3695 SCENIC HWY 98
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

3695 SCENIC HWY 98
DESTIN, FL 32541

New Mailing Address:

FEI Number: 59-3550936

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HOPKINS, BILL
BCH PT OWNERS ASSO., INC
3695 SCENIC HWY 98
DESTIN, FL 32541 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: PD () Delete
Name: FREEMAN, ROBERT
Address: 2640 STONEY BROOK LN
City-St-Zip: MARIETTA, GA 30062

Title: VPD () Delete
Name: STAFFORD, BILL
Address: 9712 MARLE HILL DR
City-St-Zip: DALLAS, TX 75238

Title: STD () Delete
Name: MACRAVEN, BRUCE
Address: 41 BURDETT RD
City-St-Zip: ATLANTA, GA 30327

Title: D () Delete
Name: GRIFFIN, FRED
Address: 3460 HIGHGATE HILLS DR
City-St-Zip: DULUTH, GA 30397

Title: D () Delete
Name: MCNUTT, TATA
Address: 3695 SCENIC HWY 98, #1104
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FREEMAN, ROBERT
Address: 2640 STONEY BROOK LN
City-St-Zip: MARIETTA, GA 30062

Title: VPD (X) Change () Addition
Name: STAFFORD, BILL
Address: 9712 MAPLE HILL DR
City-St-Zip: DALLAS, TX 75238

Title: STD (X) Change () Addition
Name: MACEWEN, BRUCE
Address: 41 BURDETT RD
City-St-Zip: ATLANTA, GA 30327

Title: D (X) Change () Addition
Name: GUFFIN, FRED
Address: 3460 HIGHGATE HILLS DR
City-St-Zip: DULUTH, GA 30397

Title: D (X) Change () Addition
Name: STARACE, JAMES
Address: 3695 SCENIC HWY 98, #103
City-St-Zip: DESTIN, FL 32541

I hereby certify that the information supplied with this filing does not qualify for the 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: BRUCE MACEWEN

STD

04/30/2006

Electronic Signature of Signing Officer or Director

Date