

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723076

Entity Name: 600 BEACH ROAD CONDOMINIUM ASSOCIATION, INC**Current Principal Place of Business:**1 TURTLE BEACH ROAD
VERO BEACH, FL 32963**Current Mailing Address:**1 TURTLE BEACH ROAD
VERO BEACH, FL 32963**FEI Number:** 59-1444207**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COMMUNITY CONDOMINIUM SERVICES INC.
1 TURTLE BEACH ROAD
VERO BEACH, FL 32963 US*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**Officer/Director Detail :**

Title	PRESIDENT
Name	RICE, C. THOMAS
Address	600 BEACH ROAD, APT. 336
City-State-Zip:	VERO BEACH FL 32963

Title	TREASURER, SECRETARY
Name	ANDERSON, STEVEN
Address	600 BEACH RD, APT 233
City-State-Zip:	VERO BEACH FL 32963

Title	VICE - PRESIDENT
Name	BARR, EDWARD S
Address	600 BEACH RD, APT 332
City-State-Zip:	VERO BEACH FL 32963

Title	DIRECTOR
Name	POHRER, GARY B
Address	600 BEACH RD, APT 226
City-State-Zip:	VERO BEACH FL 32963

Title	DIRECTOR
Name	MANGO, PHILLIP
Address	600 BEACH ROAD, APT 227
City-State-Zip:	VERO BEACH FL 32963

Title	DIRECTOR
Name	GLAHOLT, DUNCAN
Address	600 BEACH ROAD, APT 331
City-State-Zip:	VERO BEACH FL 32963

Title	DIRECTOR
Name	HARRIS, LAURA
Address	600 BEACH RD, APT 330
City-State-Zip:	VERO BEACH FL 32963

Title	ASST. SECRETARY
Name	GENOVESE, JEANETTE
Address	1 TURTLE BEACH ROAD
City-State-Zip:	VERO BEACH FL 32963

I hereby 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 all other like empowered.

SIGNATURE: JEANETTE GENOVESE**ASST SECRETARY****03/27/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date