

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 744977

**Entity Name:** BEACHPLACE ASSOCIATION, INC.

**Current Principal Place of Business:**

1109 GULF OF MEXICO DRIVE  
LONGBOAT KEY, FL 34228

**Current Mailing Address:**

1109 GULF OF MEXICO DRIVE  
LONGBOAT KEY, FL 34228

**FEI Number:** 59-1936363

**Certificate of Status Desired:** Yes

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

LYSEN, LOREN  
1109 GULF OF MEXICO DR  
LONGBOAT KEY, FL 34228 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:** LOREN LYSEN

01/06/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            PEAKES, LEE  
Address        1109 GULF OF MEXICO DRIVE  
City-State-Zip: LONGBOAT KEY FL 34228

Title            SECRETARY  
Name            REED, C.L.  
Address        1109 GULF OF MEXICO DRIVE  
City-State-Zip: LONGBOAT KEY FL 34228

Title            TD  
Name            PIKE, NED  
Address        1109 GULF OF MEXICO DRIVE  
City-State-Zip: LONGBOAT KEY FL 34228

Title            ASST. SECRETARY  
Name            JACOBS, BUDEE  
Address        1109 GULF OF MEXICO DRIVE  
City-State-Zip: LONGBOAT KEY FL 34228

Title            VP  
Name            BLANFORD, DAVID  
Address        1109 GULF OF MEXICO DRIVE  
City-State-Zip: LONGBOAT KEY FL 34228

Title            DIRECTOR  
Name            MARSHALL, JOHN  
Address        1109 GULF OF MEXICO DRIVE  
City-State-Zip: LONGBOAT KEY FL 34228

Title            DIRECTOR  
Name            AHERN, PAUL  
Address        1109 GULF OF MEXICO DRIVE  
City-State-Zip: LONGBOAT KEY FL 34228

*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:** LEE PEAKES

PRESIDENT

01/06/2017

Electronic Signature of Signing Officer/Director Detail

Date