

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 748789

**Entity Name:** THE BEACH CABANAS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

16 ANDREWS AVENUE  
DELRAY BEACH, FL 33483

**Current Mailing Address:**

1000 MARKET STREET  
SUITE 300  
PORTSMOUTH, NH 03801

**FEI Number:** 59-2006065

**Certificate of Status Desired:** No

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

CRITCHFIELD, RICHARD H  
1001 EAST ATLANTIC AVENUE  
SUITE 201  
DELRAY BEACH, FL 33483 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 PD  
Name MCMURRAIN, THOMAS T  
Address 1001 EAST ATLANTIC AVENUE,  
SUITE 202  
City-State-Zip: DELRAY BEACH FL 33483  
  
Title STD  
Name ADE, RICHARD C  
Address 1000 MARKET STREET, BLDG.#1  
City-State-Zip: PORTSMOUTH NH 03801

Title VD  
Name BERGER, ANDREW  
Address 1001 EAST ATLANTIC AVENUE, SUITE  
202  
City-State-Zip: DELRAY BEACH FL 33483

*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:** RICHARD C. ADE

STD

01/16/2018

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date