

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000001477

**Entity Name:** THE SHOPPES AT BEACON LIGHT MERCHANTS ASSOCIATION  
INC.**FILED**  
**Jan 08, 2019**  
**Secretary of State**  
**7248593393CC****Current Principal Place of Business:**2400 BLOCK OF N. FEDERAL HWY  
LIGHTHOUSE POINT, FL 33064**Current Mailing Address:**1827 NE 24 ST  
LIGHTHOUSE POINT, FL 33064 US**FEI Number: 65-1130731****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**FRIEDMAN, ROBERT  
1827 NE 24 ST  
LIGHTHOUSE POINT, FL 33064 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: ROBERT FRIEDMAN****01/08/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**Title DIRECTOR, VP  
Name ROBINSON, Omayra  
Address 1821 NE 24TH ST  
City-State-Zip: LIGHTHOUSE POINT FL 33064Title DIRECTOR, PRESIDENT  
Name FRIEDMAN, ROBERT  
Address 1827 NE 24 ST  
City-State-Zip: LIGHTHOUSE POINT FL 33064Title TREASURER  
Name WALSH, MILLIE  
Address 1817 NE 24TH ST  
City-State-Zip: LIGHTHOUSE POINT FL 33064Title DIRECTOR  
Name LAUBSCHER, LANE  
Address 1810 NE 25TH STREET  
City-State-Zip: LIGHTHOUSE POINT FL 33064Title DIRECTOR  
Name WOODMANSEE, JULIETTE  
Address 2440 N FEDERAL HIGHWAY  
City-State-Zip: LIGHTHOUSE POINT FL 33064

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: Omayra Robinson****VP****01/08/2019**

Electronic Signature of Signing Officer/Director Detail

Date