

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08678

**FILED**  
**Jan 31, 2024**  
**Secretary of State**  
**5446388602CC**

**Entity Name:** BEACHWOOD VILLAS CONDOMINIUM OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

3799 EAST COUNTY HIGHWAY 30A  
SANTA ROSA BEACH, FL 32459

**Current Mailing Address:**

3799 EAST COUNTY HIGHWAY 30A  
SANTA ROSA BEACH, FL 32459 US

**FEI Number: 59-2549854**

**Certificate of Status Desired: No**

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

SHIPMAN, GARY A  
2063 SO. CO. HWY. 395  
SANTA ROSA BEACH, FL 32459 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            OVERSTREET, THOMAS  
Address        207 CROSS ROAD  
City-State-Zip: ACWORTH GA 30102

Title            DIRECTOR  
Name            FORRET, JAMES  
Address        5865 SOUTH TIMBER RIDGE COURT  
City-State-Zip: NEW BERLIN WI 53151

Title            DIRECTOR, VP  
Name            CORNELIS, PETER  
Address        3799 E CO. HWY 30A  
City-State-Zip: SANTA ROSA BEACH FL 32459

Title            BOARD MEMBER  
Name            LAVERY, COURTNEY  
Address        2441 US HWY 98 W  
                 SUITE 109  
City-State-Zip: SANTA ROSA BEACH FL 32459

Title            BOARD MEMBER  
Name            PIKE, JAMES  
Address        2441 US HWY 98 W  
                 SUITE 109  
City-State-Zip: SANTA ROSA BEACH FL 32459

Title            TREASURER  
Name            KNIGHT, ERIN  
Address        2441 US HWY 98 W  
                 SUITE 109  
City-State-Zip: SANTA ROSA FL 32459

Title            SECRETARY  
Name            SUTTON, R  
Address        2441 US HWY 98 W  
                 SUITE 109  
City-State-Zip: SANTA ROSA BEACH FL 32459

*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: THOMAS OVERSTREET**

**PRESIDENT**

**01/31/2024**

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

\_\_\_\_\_  
Date