

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000011162

**Entity Name:** BRECKENRIDGE BEACH VILLAS CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 06, 2023**  
**Secretary of State**  
**8563898985CC**

**Current Principal Place of Business:**

5500 GULF BOULEVARD  
ST. PETE BEACH, FL 33706

**Current Mailing Address:**

5500 GULF BOULEVARD  
ST. PETE BEACH, FL 33706 US

**FEI Number: 46-1521517**

**Certificate of Status Desired: No**

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

CORPORATE CREATIONS NETWORK, INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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            DAVIES, MATT  
Address        5500 GULF BOULEVARD  
City-State-Zip: ST. PETE BEACH FL 33706

Title            S/T  
Name            FOX, DAWN  
Address        5500 GULF BOULEVARD  
City-State-Zip: ST. PETE BEACH FL 33706

Title            VP  
Name            SMITH, JOSEPH  
Address        5500 GULF BOULEVARD  
City-State-Zip: ST. PETE BEACH FL 33706

*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: DAWN FOX

S/T, BY LAUREN DUEMIG, 04/06/2023  
ATTORNEY-IN-FACT

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

\_\_\_\_\_  
Date