2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004679

Entity Name: BEACHSIDE VILLAS CONDOMINIUM ASSOCIATION, INC.

FILED Feb 10, 2019 Secretary of State 0302135094CC

Current Principal Place of Business:

5440 FIRST COAST HWY. AMELIA ISLAND. FL 32034

Current Mailing Address:

C/O AMELIA ISLAND MANAGEMENT 5440 FIRST COAST HWY AMELIA ISLAND. FL 32034 US

FEI Number: 59-3467679 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

LAMBIASE, NICHOLAS JR. 5440 FIRST COAST HWY. AMELIA ISLAND, FL 32034 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: NICHOLAS LAMBIASE, JR.

02/10/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title SD Title PD

Name MARHAVER, CARL Name RUSNAK, ALBERT

Address C/O AMELIA ISLAND MANAGEMENT Address C/O AMELIA ISLAND MANAGEMENT

5440 FIRST COAST HWY 5440 FIRST COAST HWY

City-State-Zip: AMELIA ISLAND FL 32034 City-State-Zip: AMELIA ISLAND FL 32034

Title D Title D

Name FILBERT, BILL Name SCHIEBLER, GEROLD DR

Address C/O AMELIA ISLAND MANAGEMENT Address C/O AMELIA ISLAND MANAGEMENT

5440 FIRST COAST HWY 5440 FIRST COAST HWY

City-State-Zip: AMELIA ISLAND FL 32034 City-State-Zip: AMELIA ISLAND FL 32034

Title TD

Name KENNEALLY, MICHAEL

Address C/O AMELIA ISLAND MANAGEMENT

5440 FIRST COAST HWY

City-State-Zip: AMELIA ISLAND FL 32034

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: RUSNAK , ALBERT

Electronic Signature of Signing Officer/Director Detail

02/10/2019

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