2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707467

FILED Mar 27, 2009 Secretary of State

Entity Name: BHCINC., A CONDOMINIUM CORPORATION

Current Principal Place of Business: New Principal Place of Business: 2170 GULF SHORE BLVD., N. **BEACON HOUSE** NAPLES, FL 34102 **New Mailing Address: Current Mailing Address:** 2170 GULF SHORE BLVD., N. **BEACON HOUSE** NAPLES, FL 34102 US FEI Number: 59-1086015 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BECKER & POLIAKOFF, P.A. ATTN: JOSEPH ADAMS 999 VANDERBILT BEACH RD. SUITE 501 NAPLES, FL 34108 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition GAMBILL, MALCOM ALT. LARRY Name: Name: 2170 GULF SHORE BVLD 74 E Address: 2170 GULF SHORE BVLD 73E Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: NAPLES, FL 34102 Title: () Delete Title: () Change () Addition PHEASANT, JOHN D Name: Name: Address: 2170 GULF SHORE BLVD 31E Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: Title: DVP () Delete Title: () Change () Addition ANSELMO, ARTHUR Name: Name: 2170 GULF SHORE BLVD 54E Address: Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: (X) Change () Addition Title: () Delete Title: Name: MOORE, TERRY Name: MOORE, TERRY 2170 GULF SHORE BLVD 41E Address: Address: 2170 GULF SHORE BLVD 41E City-St-Zip: NAPLES, FL 34102 City-St-Zip: NAPLES, FL 34102 Title: () Delete Title: (X) Change () Addition SCIANNA, PETER HARTS, JOHN Name: Name: 2170 GULF SHORE BLVD 72N 2170 GULF SHORE BLVD 62E Address: Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: NAPLES, FL 34102 Title: () Delete Title: () Change () Addition BELL. RICHARD Name: Name: Address: 2170 GULF SHORE BLVD 43 E. Address: NAPLES, FL 34102 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN D. PHEASANT T 03/27/2009