


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90305 033 \*\*\*\*61.25

<b>DOCUMENT # 714393</b>					
1. Entity Name <b>BEACH MANOR VILLAS, INC.</b>					
Principal Place of Business <b>1162 INDIAN HILLS BLVD VENICE, FL 34293</b>			Mailing Address <b>1162 INDIAN HILLS BLVD VENICE, FL 34293</b>		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number <b>59-1313049</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<del>CALDWELL, ANNETTE K. 1162 INDIAN HILLS BLVD VENICE, FL 34293</del>				Name <b>KEYS CALDWELL, INC.</b>	
				Street Address (P.O. Box Number is also acceptable) <b>1162 INDIAN HILLS BLVD.</b>	
				City <b>VENICE, FL 34293</b>	
				State <b>FL</b>	
				Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u><i>James A. Hunt</i></u>				DATE <u>4/12/06</u>	
Filing Fee is <b>\$61.25</b> Due by <b>May 1, 2006</b>				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
Make check payable to <b>Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	STD	<input type="checkbox"/> Delete	TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROUVET, MARIJANE		NAME	Robert Gulliatte	
STREET ADDRESS	105 FIELD AVE		STREET ADDRESS	1025 The Rialto	
CITY-ST-ZIP	VENICE, FL 34285		CITY-ST-ZIP	Venice FL 34285	
TITLE	VD	<input type="checkbox"/> Delete	TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GILLIUTTE, ROBERT		NAME	Ed Hunnicot	
STREET ADDRESS	1025 THE RIALTO		STREET ADDRESS	196 The Corso	
CITY-ST-ZIP	VENICE, FL 34285		CITY-ST-ZIP	VENICE FL 34285	
TITLE	D	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MURRAY, EDWARD		NAME	Donald Patterson	
STREET ADDRESS	145 FIELD AVE		STREET ADDRESS	176 The Corso	
CITY-ST-ZIP	VENICE, FL 34285		CITY-ST-ZIP	VENICE, FL 34285	
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ELDRIDGE, RICHARD		NAME		
STREET ADDRESS	133 FIELD AVE E		STREET ADDRESS		
CITY-ST-ZIP	VENICE, FL		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PETTINATO, NICK		NAME		
STREET ADDRESS	144 THE CORSO E		STREET ADDRESS		
CITY-ST-ZIP	VENICE, FL		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FERRETI, JOE		NAME		
STREET ADDRESS	1065 THE RIALTO		STREET ADDRESS		
CITY-ST-ZIP	VENICE, FL 34285		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Robert Gulliatte</i></u>				Date <u>4-24-06</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Daytime Phone #	