2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2009
Secretary of State

DOCUMENT# 716555

Entity Name: BEACH MANOR VILLAS, SOUTH, INC.

Current Principal Place of Business:

KEYS CALDWELL INC
1152 INDIAN HILLS BLVD
VENICE, FL 34285

New Principal Place of Business:

Current Mailing Address:

KEYS CALDWELL INC
1152 INDIAN HILLS BLVD
VENICE, FL 34285 US

New Mailing Address:

FEI Number: 59-1443088 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KEYS CALDWELL INC
1162 INDIAN HILLS BLVD
VENICE, FL 34293 US

Name and Address of New Registered Agent:

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:

Title: VD ( ) Delete
Name: STEWART, JACK
Address: 1019 BEACH MANOR CTR 35
City-St-Zip: VENICE, FL 34285

Title: D ( ) Delete
Name: TANZELLA, BOB
Address: 1015 COOPER ST 25
City-St-Zip: VENICE, FL 34285

Title: PD ( ) Delete
Name: ELLWINGER, GAIL WATSON
Address: 27 BCH MANOR LN 16
City-St-Zip: VENICE, FL 34285

Title: STD ( ) Delete
Name: GIRARD, MAURICE
Address: 1014 BCH MANOR CIR 38
City-St-Zip: VENICE, FL 34285

Title: D ( ) Delete
Name: MAGI, PAUL
Address: 1026 BEACH MANOR CNT #32
City-St-Zip: VENICE, FL 34285

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: MAGI, PAUL
Address: 1026 BEACH MANOR CENTER, #32
City-St-Zip: VENICE, FL 34285

Title: PD (X) Change ( ) Addition
Name: GRANT, ROBERT
Address: 1017 BEACH MANOR CIRCLE, #52
City-St-Zip: VENICE, FL 34285

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: FITTS, STANLEY
Address: 1015 BEACH MANOR CENTER, #37
City-St-Zip: VENICE, FL 34285

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: ROBERT GRANT PD 04/20/2009

Electronic Signature of Signing Officer or Director — Date