

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723093

FILED
Apr 13, 2009
Secretary of State

Entity Name: PARADISE BEACH CLUB CONDOMINIUM ASSOCIATION#1 INC

Current Principal Place of Business:

ASSOCIATION # 1 INC
975 A1A
SATELLITE BEACH, FL 329372341

New Principal Place of Business:

Current Mailing Address:

ASSOCIATION # 1 INC
975 A1A
SATELLITE BEACH, FL 329372341

New Mailing Address:

FEI Number: 59-1491527 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OSIPOWICZ, EDWARD
975 A1A
SATELLITE BCH, FL 32937 US

Name and Address of New Registered Agent:

FOX, CAROL
6361 PORTOFINA LANE
MELBOURNE, FL 32940 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: CAROL FOX

04/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: OSIPOWICZ, EDWARD
Address: 975 HIGHWAY A1A
City-St-Zip: SATELLITE BCH, FL 32937

Title: PD () Delete
Name: JONES, JOHN
Address: 441 S COLLEGE ST
City-St-Zip: METTER, GA 30439

Title: SD () Delete
Name: BOSTER, VICTORIA
Address: 76 WHITE PINE DR
City-St-Zip: GRAYSON, KY 44143

Title: VPD () Delete
Name: FOX, CAROL
Address: 6361 PORTOFINA LANE
City-St-Zip: MELBOURNE, FL 32940

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LIGHTFOOT, SCOTT
Address: 449 W. COUNTY RD. 650 S.
City-St-Zip: NEW CASTLE, IN 47362

Title: VPD (X) Change () Addition
Name: FOX, CAROL
Address: 6361 PORTOFINA LANE
City-St-Zip: MELBOURNE, FL 32940

Title: SD (X) Change () Addition
Name: MCGRATH, CINDY
Address: 1320 JERSEY AVENUE
City-St-Zip: ST. CLOUD, FL 34769

Title: TD (X) Change () Addition
Name: GEIST, JOHN
Address: 665 REDWOOD COURT
City-St-Zip: SATELLITE BEACH, FL 32937

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: CAROL FOX

VPD

04/13/2009

Electronic Signature of Signing Officer or Director

Date