2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#723396

FILED Jan 26, 2009 Secretary of State

Entity Name: BEACHWOOD CONDOMINIUM APARTMENTS, INC.

Current Principal Place of Business: New Principal Place of Business: 1320 BLUE POINT AVENUE 1320 BLUE POINT AVENUE NAPLES, FL 34102 NAPLES, FL 34102 **New Mailing Address: Current Mailing Address:** P.O. BOX 7413 NAPLES, FL 34101 FEI Number: 59-1817530 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: KUNIHIRO, DESIREE KUNIHIRO, DESIREE 1320 BLUÉ POINT AVENUE, #2 1320 BLUÉ POINT AVENUE, #4 NAPLES, FL 34102 NAPLES, FL 34102 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: 01/26/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SARISKY, EDWARD Name: Name: 1320 BLUE POINT AVENUE, #4 Address: Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: BRATTELLI, DIANE Name: HAWKINS, DICK Address: 67 CHELSEA CIRCLE Address: 1320 BLUE POINT AVENUE, #5 City-St-Zip: CLEMTON, NJ 08021 City-St-Zip: NAPLES, FL 34102 Title: () Delete Title: (X) Change () Addition LYKINS, ANTHONY Name: LYKINS, ANTHONY Name: 5761 WAXMYRTLE 5761 WAXMYRTLE Address: Address: City-St-Zip: NAPLES, FL 34109 City-St-Zip: NAPLES, FL 34109 Title: () Delete Title: (X) Change () Addition Name: HAWKINS, DICK Name: MCFARLANE, MICHAEL 1320 BLUE POINT AVENUE, #5 3727 PROSPECT Address: Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: NAPLES, FL 34104 Title: () Delete Title: (X) Change () Addition KUNIHIRO, DESIREE TAMMERK, TOVIO Name: Name: 1320 BLUE POINT AVENUE, #2 15 LADYSLIPPER CIRCLE Address: Address: AMHERST, MA 01002 City-St-Zip: NAPLES, FL 34102 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: ED SARISKY P 01/26/2009