

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725259

FILED  
Jan 30, 2009  
Secretary of State

**Entity Name:** BEACON 21 CONDOMINIUM H ASSOCIATION, INC

**Current Principal Place of Business:**

P.O. BOX 548  
JENSEN BEACH, FL 34958

**New Principal Place of Business:**

1501 NE 13TH TER.  
JENSEN BEACH, FL 34957

**Current Mailing Address:**

P.O. BOX 548  
JENSEN BEACH, FL 34958

**New Mailing Address:**

**FEI Number:** 59-1514574      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HAHN, HARRY A  
1501 N.E. 13 TERRACE  
UNIT H-13  
JENSEN BEACH, FL 34957 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: PD ( ) Delete  
Name: HAHN, HARRY A  
Address: 1501 N.E. 13TH TERRACE H-13  
City-St-Zip: JENSEN BEACH, FL 34957

Title: PD ( ) Delete  
Name: HONTZ, HOMER  
Address: 1501 N.E. 13TH TERRACE H-4  
City-St-Zip: JENSEN BEACH, FL 34957

Title: SD ( ) Delete  
Name: HUNTZ, SHARON  
Address: 1501 NE 13TH TERR H-4  
City-St-Zip: JENSEN BEACH, FL 34957

Title: TD ( ) Delete  
Name: MALLOY, JOSEPH  
Address: 1501 N.E. 13TH TERRACE H-3  
City-St-Zip: JENSEN BEACH, FL 34957

Title: D ( ) Delete  
Name: MANGRUM, BARBARA  
Address: 1501 N.E. 13TH TERRACE H-1  
City-St-Zip: JENSEN BEACH, FL 34957

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: SD (X) Change ( ) Addition  
Name: HONTZ, SHARON  
Address: 1501 NE 13TH TERR H-4  
City-St-Zip: JENSEN BEACH, FL 34957

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: SHARON HONTZ

SD

01/30/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date