

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725419

FILED
Apr 21, 2009
Secretary of State

Entity Name: LIDO BEACH CLUB ASSOCIATION, INC.

Current Principal Place of Business:

1212 BEN FRANKLIN DRIVE
SARASOTA, FL 34236 US

New Principal Place of Business:

Current Mailing Address:

1212 BEN FRANKLIN DRIVE
SARASOTA, FL 34236 US

New Mailing Address:

FEI Number: 59-1534560

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BETH CALLANS MGMT CORP
595 BAY ISLES RD STE 200
LONGBOAT KEY, FL 34228 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: P () Delete
Name: SEBASTIAN, SAMUEL
Address: 1212 BEN FRANKLIN DR #804
City-St-Zip: SARASOTA, FL 34236 US

Title: S () Delete
Name: WALLACK, ANDREA
Address: 1212 BEN FRANKLIN DR #204
City-St-Zip: SARASOTA, FL 34236 US

Title: T () Delete
Name: MICHAILIDIS, MICHAEL
Address: 1212 BEN FRANKLIN DR #603
City-St-Zip: SARASOTA, FL 34236 US

Title: V () Delete
Name: HELLER, ED
Address: 1212 BEN FRANKLIN DR#906
City-St-Zip: SARASOTA, FL 34236 US

Title: D () Delete
Name: BURBANO, CHERYL
Address: 1212 BEN FRANKLIN DR #506
City-St-Zip: SARASOTA, FL 34236

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BRYG, LAURA
Address: 1212 BEN FRANKLIN DR #404
City-St-Zip: SARASOTA, FL 34236 US

Title: S (X) Change () Addition
Name: GORICK, JOEL
Address: 1212 BEN FRANKLIN DR #1209
City-St-Zip: SARASOTA, FL 34236 US

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

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

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

Title: D () Change (X) Addition
Name: ZANONI, LEON
Address: 1212 BEN FRANKLIN DR. #808
City-St-Zip: SARASOTA, FL 34236

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: MICHAEL MICHAILIDIS

T

04/21/2009

Electronic Signature of Signing Officer or Director

Date