
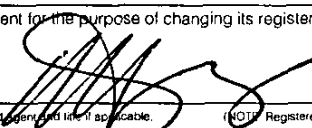
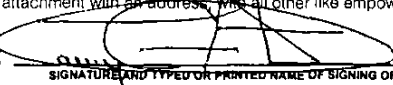


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 08, 2008 8:00 am**  
**Secretary of State**

05-08-2008 90015 018 \*\*\*\*61.25

<b>DOCUMENT # 725553</b> 1. Entity Name 400 BEACH ROAD CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 1 TURTLE BEACH ROAD VERO BEACH, FL 32963			Mailing Address 1 TURTLE BEACH ROAD VERO BEACH, FL 32963		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1514531	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
LANAHAN, RICHARD 1 TURTLE BEACH ROAD VERO BEACH, FL 32963			Name <u>Peter Young</u> Street Address (P.O. Box Number Not Acceptable) <u>1 Turtle Beach Road</u> City <u>Vero Beach</u> <u>FL</u> Zip Code <u>32963</u>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  <small>Signature, typed or printed name of registered agent and like it applicable. (NOT: Registered Agent signature required when reinstating)</small>			DATE <u>4/21/2008</u>		
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
		<b>Make check payable to Florida Department of State</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	LESHE, ROBERT J		NAME		
STREET ADDRESS	103 400 BEACH RD		STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH, FL		CITY-ST-ZIP		
TITLE	SD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	NORRIS, E. CLIFFORD JR		NAME		
STREET ADDRESS	400 BEACH RD #221		STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH, FL 32963		CITY-ST-ZIP		
TITLE	VPTD	<input checked="" type="checkbox"/> Delete	TITLE	VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	SHERMAN, JAMES S		NAME	Shearman, Tom S.	
STREET ADDRESS	400 BEACH RD #211		STREET ADDRESS	4571 Pebble Bay	
CITY-ST-ZIP	VERO BEACH, FL 32963		CITY-ST-ZIP	Vero Beach, FL 32963	
TITLE	AS	<input checked="" type="checkbox"/> Delete	TITLE	AS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	LANAHAN, RICHARD		NAME	Gerstner, Larry	
STREET ADDRESS	1 TURTLE BEACH ROAD		STREET ADDRESS	1 Turtle Beach Road	
CITY-ST-ZIP	VERO BEACH, FL 32963		CITY-ST-ZIP	Vero Beach, FL 32963	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	WALDNER, CHARLES E JR		NAME	McCabe, Robert	
STREET ADDRESS	400 BEACH ROAD #203		STREET ADDRESS	331 Indian Harbor Road	
CITY-ST-ZIP	VERO BEACH, FL 32963		CITY-ST-ZIP	Vero Beach, FL 32963	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	NICHOLAS, TED		NAME	Weibel, Joseph	
STREET ADDRESS	400 BEACH RD #137		STREET ADDRESS	380 Sabal Palm Lane	
CITY-ST-ZIP	VERO BEACH, FL 32963		CITY-ST-ZIP	Vero Beach, FL 32963	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			DATE <u>4/21/08</u>		
			Daytime Phone #		