2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2009
Secretary of State

DOCUMENT# 725750

Entity Name: BEACON 21 CONDOMINIUM "B" ASSOCIATION INC

Current Principal Place of Business:

1550 NE 13TH TERR
B-13
JENSEN BEACH, FL 34957

New Principal Place of Business:

Current Mailing Address:

969 S. FEDERAL HWY
401
STUART, FL 34994

New Mailing Address:

FEI Number: 59-1514607 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SIGNATURE PROPERTY MGMT.
969 S. FEDERAL HWY #401
STUART, FL 34994 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: STD ( ) Delete
Name: PHILBRICK, KENNETH
Address: 1550 NE 13TH TERR. B-14
City-St-Zip: JENSEN BEACH, FL 34957

Title: D ( ) Delete
Name: SNOW, STEVEN
Address: 1550 NE 13TH TERRACE B-05
City-St-Zip: JENSEN BEACH, FL 34957

Title: D ( ) Delete
Name: LARSON, BILL
Address: 1550 NE 13TH TERRACE
City-St-Zip: JENSEN BEACH, FL 34957

Title: VD ( ) Delete
Name: WEAVER, JOAN
Address: 1550 NE 13TH TERR.
City-St-Zip: JENSEN BEACH, FL 34957

Title: PD ( ) Delete
Name: THOMAS, ANTOMA
Address: 1550 NE 13 TERRACE B-08
City-St-Zip: JENSEN BEACH, FL 34957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: STANLEY, STEVEN
Address: 1550 NE 13TH TERRACE B-06
City-St-Zip: JENSEN BEACH, FL 34957

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

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

Title: PD (X) Change ( ) Addition
Name: THOMAS, ANTONIA
Address: 1550 NE 13 TERRACE B-08
City-St-Zip: JENSEN BEACH, FL 34957

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: LENARD GOLDBAUM AGNT 03/24/2009

Electronic Signature of Signing Officer or Director — Date