

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 31, 2005 8:00 am
Secretary of State

01-31-2005 90046 002 ****61.25



DOCUMENT # 725777
 1. Entity Name
BEACON 21 CONDOMINIUM "G" ASSOCIATION, INC.

Principal Place of Business COMPLEX G BEACON 21 JENSEN BEACH FL 34957 US	Mailing Address 1500 NE. 13TH TERRACE G3 JENSEN BEACH FL 34957 US
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2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	3. Mailing Address Suite, Apt. #, etc. City & State Zip	Country	Country
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1st MOORE CR2E037 (10/04)

6. Name and Address of Current Registered Agent
**BREVES, VALERIE
 1500 N.E. 13TH TERRACE
 G3
 JENSEN BEACH FL 34957**

4. FEI Number **59-1514576** Applied For Not Applicable
 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP	P TRAVENICK, ROBERT 1500 NE 13 TERR APT G-5 JENSEN BEACH FL 34957
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP	D CROOKE, WALTER 1500 NE 113 TERRACE G-1 JENSEN BEACH FL 34957
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP	MGR BREVES, VALERIE 1500 NE 13TH TERR APT G-3 JENSEN BEACH FL 34957
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP	D SNOW, FRED 1500 NE 13 TERRACE G-2 JENSEN BEACH FL
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP	VD THOMSON, DAVID 1500 NE 13 TERRACE G-4 JENSEN BEACH FL 34957
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP	D JEFFERSON, HOWARD 1500 NE 13 TERR G-13 JENSEN BEACH FL 34957

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	DIR TRAVENICK, ROBERT 1500 NE 13 TERR G5 JENSEN BEACH FL
TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	SAME
TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	SAME
TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	PRES. SNOW, FRED 1500 NE 13 TERR G2 JENSEN BEACH FL 34957
TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	VICE PRES THOMSON, DAVID 1500 NE 13 TERR G4 JENSEN BEACH FL
TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	TREAS. JEFFERSON, HOWARD 1500 NE 13 TERR G13 JENSEN BEACH FL

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Valerie J. Breves, MGR.* **1-24-05 772-334-3687**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone