2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725961

FILED May 04, 2009 Secretary of State

Entity Name: BEACH ROAD ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place of Business:
225 BEAC #204	CHRD	
	ΓA, FL 33469	
Current N	Nailing Address:	New Mailing Address:
P.O. BOX TEQUEST	4122 FA, FL 33469	
n accordar	r: 51-0189595 FEI Number Applied For() nce with s. 607.193(2)(b), F.S., the corporation did	·
Name and	d Address of Current Registered Agent:	Name and Address of New Registered Agent:
WALSH, JOSEPH A RA 50 BEACH RD #101 TEQUESTA, FL 33469 US		WALSH, JOSEPH A RA 50 BEACH RD. #101 TEQUESTA, FL 33469 US
The above	•	e purpose of changing its registered office or registered agent, or both,
SIGNATU	RE:	05/04/2009
	Electronic Signature of Registered A	
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
Title: Name: Address: City-St-Zip:	DS () Delete JOHNSON, GERRY DS 50 BEACH RD. #304 TEQUESTA, FL 33469 PB	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	DT () Delete WALSH, JOSEPH A DT 50 BEACH ROAD #101 TEQUESTA, FL 33469 PB	Title: D (X) Change () Addition Name: WALSH, JOSEPH A D Address: 50 BEACH ROAD #101 City-St-Zip: TEQUESTA, FL 33469 PB
Fitle: Name: Address: City-St-Zip:	DV () Delete LIGHTON, JACK DV 19750 BEACH RD #204 TEQUESTA, FL 33469 PB	Title: () Change () Addition Name: Address: City-St-Zip:
Fitle: Name: Nddress: City-St-Zip:	D () Delete COHEN, KAREN D 19930 BEACH RD #302 TEQUESTA, FL 33469 PB	Title: DT (X) Change () Addition Name: COHEN, KAREN DT Address: 19930 BEACH RD #302 City-St-Zip: TEQUESTA, FL 33469 PB
Title: Name: Address: City-St-Zip:	DP () Delete GOODLAND, JOHN DP 225 BEACH RD#204 TEQUESTA, FL 33469 PB	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Vame:	D () Delete NOE, DAVID 19930 BEACH ROAD #303	Title: D (X) Change () Addition Name: NOE, DAVID D Address: 19930 BEACH ROAD #303

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: JOHN GOODLAND DP 05/04/2009