2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Apr 17, 2008 8:00 am Secretary of State

04-17-2008 90043 027 ****61.25

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAM

OF SIGNING OFFICER OR DIRECTOR

BEACH COTTAGES CONDOMINIUM ASSOCIATION, INC.



40070335 Principal Place of Business Mailing Address ISLAND MANAGEMENT GROUP P.O. BOX 194 ATTN: ASSN. MGMT. P.O. BOX 100 SANIBEL, FL 33957 CAPTIVA ISLAND, FL 33924 2. Principal Place of Business - No P.O. Box # 711 TARPONBAY RD 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 01172008 CR2E037 (12/06) City & State Applied For City & State 4. FEI Numbe 59-1725725 DANIBEL Not Applicable \$8.75 Additional Country Country 5. Certificate of Status Desired 💄 🔲 US A 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MACKESY S+EVEN SOUTH SEAS PLANTATION RESORT Street Address (P.O. Box Number is Not Acceptable) 13000 CAPTIVA ROAD ATTN: ASSN MGMT. CAPTIVA ISLAND, FL 33924 TARPON BAY RI) Zip Code 33 957 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 Signature, typed or printed name of registered agent and title if applicable Make check payable to 9. Election Campaign Financing Filing Fee Is \$61.25 \$5.00 May Be Florida Department of State Trust Fund Contribution. Added to Fees Due by May 1, 2008 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. STD Change ☐ Addition Delete TITLE TITLE THRELKEL, ELLIE NAME NAME STREET ADDRESS 1315 N LAKE ELBERT DRIVE STREET ADDRESS WINTER HAVEN, FL 33881 CITY-ST-ZIP CITY - ST - ZIP ☐ Change ☐ Addition Delete 1ITLE TITLE CLARK, GERALD NAME NAME STREET ADDRESS STREET ADDRESS 12508 CLARK MANOR CIR SAINT LOUIS, MO 63141 CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE TITLE DRISSELL, NORMAN NAME NAME STREET ADDRESS 914 INNSBROOKE ESTATES STREET ADDRESS CITY - ST - ZIP VILLAGE OF INNSBROOK, MO 63390 City-St-7(P Channe ■ Addition TITLE TITLE Delete LLOYD, ROBERT NAME NAME STREET ADDRESS 9112 MARIA AVENUE STREET ADDRESS GREAT FALLS, VA 22066 CITY - ST - ZIP CITY-ST-ZIP Addition ☐ Delete TITLE TITLE HOGENMILLER, JEFF NAME NAME STREET ADDRESS STREET ADDRESS 1212 LOYOLA DRIVE LIBERTYVILLE, IL 60048 CITY-ST-ZIP CITY-ST-ZIP Addition TITLE Change TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST- ZIP 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 principles empowered.