## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#737786**

FILED Jun 30, 2005 Secretary of State

Entity Name: PARADISE BEACH VILLAS CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 180-0 PARADISE BLVD. INDIALANTIC, FL 32903 **Current Mailing Address: New Mailing Address:** 180-0 PARADISE BLVD INDIALANTIC, FL 32903 FEI Number: 59-1790607 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BECHER, WILLIAM PECORARO, RAYMOND P 190-12 PÁRDISE BLVD. 170-14 PARDISE BLVD. INDIALANTIC, FL 32903 US INDIALANTIC, FL 32903 US 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: RAYMOND P PECORARO 06/30/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition KOVAC, ROSEMARIE Name: Name: 190-16 PARADISE BLVD Address: Address: City-St-Zip: INDIALANTIC, FL 32903 City-St-Zip: Title: () Delete Title: () Change () Addition Name: MATHENY, CARL Name: Address: 190-5 PARADISE BLVD. Address: City-St-Zip: INDIALANTIC, FL 32903 City-St-Zip: Title: () Delete Title: () Change () Addition BURROWS, CARL Name: Name: 170-17 PARADISE BLVD Address: Address: City-St-Zip: INDIALANTIC, FL 32903 City-St-Zip: ( ) Delete Title: Title: () Change () Addition NEWBERRY, WILLIAM Name: Name: 180-3 PARADISE BLVD Address: Address: City-St-Zip: INDIALANTIC, FL 32903 City-St-Zip: Title: ( ) Delete Title: SD (X) Change ( ) Addition CARRASCO, JOANNE BURROWS, CECELIA Name: Name: 170-9 PARADISE BLVD 170-9 PARADISE BLVD Address: Address: City-St-Zip: INDIALANTIC, FL 32903 City-St-Zip: INDIALANTIC, FL 32903

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RAYMOND P PECORARO TREA 06/30/2005