

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738523

FILED
May 19, 2007
Secretary of State

Entity Name: BEACON 21 CONDOMINIUM OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 1635
JENSEN BEACH, FL 34958

New Principal Place of Business:

1662 NE DIXIE HWY
JENSEN BEACH, FL 34957

Current Mailing Address:

PO BOX 1635
JENSEN BEACH, FL 34958

New Mailing Address:

FEI Number: 59-1785506 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:

SIGNATURE PROPERTY MGMT
969 S FEDERAL HWY STE 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: P () Delete
Name: MALLOY, JOE
Address: 1501 NE 13TH TERR #H3
City-St-Zip: JENSEN BEACH, FL 34957

Title: VP () Delete
Name: PORTER, BILL
Address: 1551 NE 13TH TERR H-2
City-St-Zip: JENSEN BEACH, FL 34957

Title: S () Delete
Name: DIEDE, LINETTE
Address: 1330 NE 14TH CT K-22
City-St-Zip: JENSEN BEACH, FL 34957

Title: T () Delete
Name: MELNICK, BOB
Address: 1577 NE NAUTICAL PL #102
City-St-Zip: JENSEN BEACH, FL 34957

Title: T (X) Delete
Name: COOPER, ROSE
Address: 1551 NE 13TH TERR A-9
City-St-Zip: JENSEN BEACH, FL 34957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FORBES, CHARLES
Address: 1550 NE 13TH TERR #B-15
City-St-Zip: JENSEN BEACH, FL 34957

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

Title: S (X) Change () Addition
Name: COOPER, ROSE
Address: 1551 NE 13TH TERR A-9
City-St-Zip: JENSEN BEACH, FL 34957

Title: T (X) Change () Addition
Name: STAPLETON, ALLISON
Address: 1421 NE 14TH CT. Q-22
City-St-Zip: JENSEN BEACH, FL 34957

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

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: ROSE COOPER

S

05/19/2007

Electronic Signature of Signing Officer or Director

_____ Date