2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2009
Secretary of State

DOCUMENT# 739560

Entity Name: BEACH WINDS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

650 N. ATLANTIC AVE.
COCOA BEACH, FL 32931

New Principal Place of Business:

Current Mailing Address:

650 N. ATLANTIC AVE.
COCOA BEACH, FL 32931

New Mailing Address:

FEI Number: 59-1847678 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CLAYTON & MCCULLOH
1065 MAITLAND CENTER COMMONS BLVD.
MAITLAND, FL 32751 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: WHALEN, MICHAEL
Address: 650 N ATLANTIC AVE 401
City-St-Zip: COCOA BEACH, FL 32931

Title: S ( ) Delete
Name: ANDREWS, GAYLE
Address: 650 N ATLANTIC AVE 501
City-St-Zip: COCOA BEACH, FL 32931

Title: VP ( ) Delete
Name: DEAN, DAVID
Address: 650 N. ATLANTIC AVE., 602
City-St-Zip: COCOA BEACH, FL 32931

Title: T ( ) Delete
Name: COX, NANCY
Address: 650 N. ATLANTIC AVE., 704
City-St-Zip: COCOA BEACH, FL 32931

Title: D ( ) Delete
Name: GALLUP, ORSON
Address: 650 N ATLANTIC , # 211
City-St-Zip: COCOA BEACH, FL 32931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CHURCHILL-VALVO, JANE
Address: 650 N ATLANTIC AVE 204
City-St-Zip: COCOA BEACH, FL 32931

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

Title: VP (X) Change ( ) Addition
Name: HUTCHENS, ED
Address: 650 N. ATLANTIC AVE., 705
City-St-Zip: COCOA BEACH, FL 32931

Title: T (X) Change ( ) Addition
Name: AZURE, BEVERLY
Address: 650 N. ATLANTIC AVE., 410
City-St-Zip: COCOA BEACH, FL 32931

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: MARILYN A. RIGERMAN ACCT 01/30/2009

Electronic Signature of Signing Officer or Director — Date