2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2009
Secretary of State

DOCUMENT# 740087

Entity Name: BEACH VILLAS III CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

711 TARPON BAY RD
SANIBEL, FL 33957 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 100
SANIBEL, FL 33957

New Mailing Address:

ISLAND MANAGEMENT
PO BOX 100
SANIBEL, FL 33957

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MACKESY, STEVEN
711 TARPON BAY RD
SANIBEL, FL 33957 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: PD ( ) Delete
Name: IVAN, PAUL
Address: 7151 MARSH RD
City-St-Zip: MARINE CITY, MI 48039

Title: VP ( ) Delete
Name: KELLY, CHARLES
Address: 111 W MUNROE
City-St-Zip: CHICAGO, IL 606034080

Title: D ( ) Delete
Name: SLOUS, LAURENCE
Address: 250 BELLEVIEW AVE
City-St-Zip: MONTCLAIR, NJ 07043

Title: D ( ) Delete
Name: STEWART, LESLIE
Address: 23722 E RIVER RD
City-St-Zip: GROSSE ILE, MI 48138

Title: ST3 ( ) Delete
Name: STUEBE, DAVID
Address: 15135 LONG HOLD RIDGE
City-St-Zip: BRISTOL, VA 24202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: IVAN, PAUL
Address: 7151 MARSH RD
City-St-Zip: MARINE CITY, MI 48039

Title: VP (X) Change ( ) Addition
Name: KELLY, CHARLES
Address: 755 HIBBARD RD
City-St-Zip: WILMETTE, IL 60091

Title: SD (X) Change ( ) Addition
Name: SLOUS, LAURENCE
Address: 250 BELLEVIEW AVE
City-St-Zip: UPPER MONT CLAIR, NJ 07043

Title: PD (X) Change ( ) Addition
Name: STEWART, LESLIE
Address: 1059 GRAYSON FARM RD
City-St-Zip: CREEDMOOR, NC 27522

Title: TD (X) Change ( ) Addition
Name: STUEBE, DAVID
Address: 15135 LONG HOLD RIDGE
City-St-Zip: BRISTOL, VA 24202

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: LESLIE STEWART PD 04/06/2009

Electronic Signature of Signing Officer or Director — Date