

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 740749

**FILED**  
**Jan 04, 2011**  
**Secretary of State**

**Entity Name:** BEACH PARKWAY ASSOCIATES, INC.

**Current Principal Place of Business:**

1613 BEACH PARKWAY  
CAPE CORAL, FL 33904

**New Principal Place of Business:**

**Current Mailing Address:**

1927 SE 37TH TERRACE, C/O J.GLOCER  
CAPE CORAL, FL 33904

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GLOCER, JORGE TRUSTEE  
1927 SE 37TH TERRACE  
CAPE CORAL, FL 33904 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  
Name: GLOCER, JORGE A TRUSTEE  
Address: 1927 S.E. 37TH TERR.  
City-St-Zip: CAPE CORAL, FL 33904

Title: SDT  
Name: GLOCER, HELENE TRUSTEE  
Address: 1927 S.E. 37TH TERR.  
City-St-Zip: CAPE CORAL, FL 33904

Title: VD  
Name: KOZLOWSKI, R.  
Address: 1613 BEACH PKWY, UNIT # 1  
City-St-Zip: CAPE CORAL, FL 33904

Title: VD  
Name: MASON, JERRY  
Address: 1613 BEACH PKWY, UNIT # 3  
City-St-Zip: CAPE CORAL, FL 33904

I hereby 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 all other like empowered.

SIGNATURE: JORGE A. GLOCER

MR.

01/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date