2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED May 01, 2008 8:00 am Secretary of State

DOCUMENT # 743852 1. Entity Name 222 BEACH ROAD OWNERS ASSOCIATION, INC.							41_	05-01-2008	•	23 ****61	25	
Principal Place 4920 FRUIT SARASOTA, I		US	Mailing Address 4920 FRUITVILLE RD SARASOTA, FL 34232	1920 FRUITVILLE RD							1 1 	
2. Principal Place of Business - No P.O. Box #			3. Mailing Address	3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.	Suite, Apt. #, etc.			01172008 C	hg-NP	CR2E03	7 (12/06)		
City & State			City & State				4. FEI Number 59-205440	01		_ 	oplied For	
Zip	Country		Zip	Zip Co.		5. Certificate of Status Desired S8.75 Additional Fee Required					litional	
6. Name and Address of Current			Registered Agent	stered Agent			7. Name and Address of New Registered Agent					
MA - CON INC						Name						
4920 FRUITVILLE ROAD SARASOTA, FL 34232					Street Address (P.O. Box Number is Not Acceptable)							
				City			1 7.007					
					City FL Zip Code							
8. 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. I am familiar with, and accept the obligations of registered agent.												
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SIGNATURE												
Filling Fee is \$61.25 9. Election Campaign Finance							\$5.00 May Be	The Market of th	ake check	payable t		
	Due by Ma	ay 1 <u>, 2</u> 008	Trust Fund (Trust Fund Contribution.			Added to Fees	Flor	ida Depart	ment of St	ate	
10.	1	OFFICERS AND DIF	RECTORS	11.			ADDITIONS/CHANG					
TITLE	PD EVINENTICED BRITIS		☐ Delete	TITLE	1	SD Change			Addition			
NAME STREET ADDRESS	FANKHAUSER, PHILIP ADDRESS 222 BEACH RD #4			NAN STRI		KIRSNER, LARRY						
CITY-ST-ZIP				CITY			2 Beach Road #1 RASOTA, FL 34242					
TITLE	SD		Delete	TITLE		SAI	XASUTA, F	<u> 142</u>	4 2	☐ Change	☐ Addition	
NAME	DORNON, KATHLEEN		X	NAM	E							
STREET ADDRESS CITY-ST-ZIP	S 222 BEACH RD #7 SARASOTA, FL 34242				ET ADDRESS	ss [*]						
	VPD	A, FL 34242			-ST-ZIP							
TITLE NAME		STEPHEN	☐ Delete	TITLE	1					Change	Addition	
STREET ADDRESS	222 BEAC		•		ET ADDRESS							
CITY-ST-ZIP	SARASOTA	A, FL 34242		CITY	-ST-ZIP						,	
TITLE	TD		☐ Delete	TITLE						☐ Change	☐ Addition	
NAME	LIROFF, RI			NAM								
STREET ADDRESS CITY-ST-ZIP	222 BEAC	A, FL 34242			ET ADDRESS -ST-ZIP				•			
TITLE	D	1,12 01212	. □ Delete	TITLE						☐ Change	- Addition	
NAME	HATFIELD,	, ALLEN	M Delete	NAME						☐ Change	☐ Addition	
STREET ADDRESS	222 BEAC				ET ADDRESS							
CITY-ST-ZIP	SARASOTA	A, FL 34242		CITY	-ST-ZIP			721			i	
TITLE NAME			☐ Delete	TITLE	- 1					☐ Change	☐ Addition	
STREET ADDRESS				NAME STREE	ET ADDRESS							
CITY-ST-ZIP					-ST-ZIP						1	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the reserved or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all phen like empowered.												