FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 29, 1999 8:00 am § Secretary of State

04-29-1999 90005 013 ****61.25

D	OCI	JM	IENT	#	74	149	39 1	
4	_							

Corporation Name

BEACH GARDEN "E" ASSOCIATION, INC.

Principal Place of Business 110 ST. EUSTACIUS LANE BONITA SPRINGS FL 34134

Mailing Address

110 ST. EUSTACIUS LANE **BONITA SPRINGS FL 34134**

	Place of Business	2a. Mailing Address			11/16/1978					
Suite, Apt, #, etc.		26 Suite, Apt. #, etc.			4. FEI Number Applied For					
22 Suite, A'H.	. #, C IO.	27			65-0(49704 Not Applicable					
City & Sta	te	City & State			_ \$8.75 Additional					
23		28			5. Certificate of Status Desired Fee Recuired					
Zip	Country	Zip	Countr	y	6. Election Campaign Financing \$5.00 May Be					
24	25	29	30		Trust Fund Contribution Added to Fees					
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered Agent					
			81	l Name	e					
PECK, DA	ANIEL D		82	82 Street Acdress (P.O. Box Number is Not Acceptable)						
5801 PELICAN BAY BLVD										
STE 103			83	3						
NAPLES	FL 33940		84	City	■ 85 Zip Code					
			1	1	ed corporation submits this statement for the purpose of changing its registered					
SIGNATUFE	am familiar with, and accept the obligations are familiar with, and accept the obligations of registered age.				e required when reinstating) DATE					
12.		II) DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition					
NAME	GEORGE, DANIEL L.		1.2 NAME							
STREET ADDRESS			1.3 STREE	TADDRESS	ss					
CITY-ST-ZIP	BONITA SPRINGS FL 34134		1.4 CITY-	ST-ZIP						
TITLE	VPD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition					
NAME	WINDFELDT, GENE L		2.2 NAME							
STREET ADDRESS	23404 WINGEDFOOT DRIVE		2.3 STREE	ET ADDRESS	is					
CITY-ST-ZIP	WESTLAKE OH 4-1145		2. 4 CITY-	ST-ZIP						
TITLE	STD	☐ DELETE	3.1 TITLE		Change Addition					
NAME	THOMASON, MAXI		3.2 NAME							
STREET ADDRESS			3.3 STREE	ET ADDRESS	is					
CITY-ST-ZIP	BATTLE CREEK MI 49015		3.4. CITY-	ST-ZIP	☐ Change ☐ Additio					
TITLE		☐ DELETE	4.1 TITLE		Change Addition					
NAME			4, 2 NAME							
STREET ADDRESS	5			ET ADDRES	S					
CITY-ST-ZIP		D DELETE	4.4 CITY-	ST-ZIP	Change Additio					
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME							
NAME				ET ADDRES	200					
STREET ADDRESS	5				100					
CITY-ST-ZIP			5.4 CITY- 6.1 TITLE		Change Additio					
TITLE .		☐ DELETE	6.2 NAME							
NAME	1		0.2 NAME							

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0°(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS