

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2001 8:00 am
Secretary of State

04-14-2001 90003 018 *****61.25

0055463

DOCUMENT # 746188

1. Entity Name

BEACH POINT CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

**2660 S OCEAN BLVD
 PALM BEACH FL 33480
 US**

Mailing Address

**2660 SO. OCEAN BLVD.
 PALM BEACH FL 33480
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1889331

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MIKE SUTTON
 2660 S OCEAN BLVD
 APT 702N
 PALM BCH FL 33480**

Name

Street Address (P.O. Box Number is Not Acceptable)

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KLEID, RICHARD M 2660 S OCEAN BLVD PALM BEACH FL 33480	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LUTZ, JOEL 2660 S. OCEAN BLVD. PALM BEACH FL 33480	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MASINTER, EDWIN 2660 SOUTH OCEAN BLVD. PALM BEACH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SUTTON, MIKE 2660 S OCEAN BLVD PALM BCH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SEGERMAN, BERNARD 2660 S. OCEAN BLVD. PALM BEACH FL 33480	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROBBINS, EDWIN 2660 S. OCEAN BLVD. PALM BEACH FL 33480	☒ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Bürger, Diana 2660 S. Ocean Blvd Palm Beach, FL 33480	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Scharer, Si 2660 S. Ocean Blvd. Palm Beach, FL 33480	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 receiver 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 other like empowered.

SIGNATURE: *Richard M. Kleid* **RICHARD M. Kleid**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/01
 Date

(561) 586-2648
 Daytime Phone #

CR2E037 (10/00)