2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2001 8:00 am
Secretary of State
04-24-2001 90275 001 ****61.25

0030443

DOCUMENT # 747086

1. Entity Name

BEACH WOODS PROPERTY OWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
155 RIVER WOODS BLVD. MELBOURNE BEACH FL 32951 US	155 RIVER WOODS BLVD. MELBOURNE BEACH FL 32951 US

DO NOT WRITE IN THIS SPACE

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 59-2095131 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DYER, DAVID W
325 FIFTH AVE.
SUITE 205
INDIANATLANTIC FL 32903

7. Name and Address of New Registered Agent

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	D CARUSO, JOHN 3203 RIVER WINDS CT MELBOURNE BEACH FL 32951	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V.P. JUDITH ROHAN 3312 SEA MIST LANE MELBOURNE BEACH, FL. 32951	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T JONES, JACK 3230 SAND DUNES CT. MELBOURNE BEACH FL 32951	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GENE PHILLIPS 3134 RIVER VILLA WAY MELBOURNE BEACH, FL. 32951	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V HORN, FRANK 3260 RIVER VILLA WY MELBOURNE BEACH FL 32951	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P POLSTER, GEORGE 3118 RIVER VILLA WAY MELBOURNE BEACH FL 32951	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GRECO, FRANK 3205 RIVER WINDS COURT MELBOURNE BEACH FL 32951	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DORSON, JOHN 3236 SAND DUNES CT MELBOURNE BEACH FL 32951	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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: SIGNATURE REQUIRED GEORGE POLSTER 4-17-01 321-729-6223
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #