2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2002 8:00 am
Secretary of State
05-29-2002 90673 045 ****61.25

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	7. Name and Address of New Registered Agent
DYER, DAVID W 325 FIFTH AVE. SUITE 205 INDIANATLANTIC FL 32903	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	D NOREEN NUZZI 3345 SANDY REEF CT 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 JUDITH ROHAN 3312 SEA MIST LN. MELBOURNE BEACH, FL. 32951	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP ROHAN, JUDITH 3312 SEA MIST LANE MELBOURNE BEACH FL 32951	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GEORGE POLSTER 3118 RIVER VILLAWAY MELBOURNE BEACH, FL. 32951	☑ 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	VP FRANK GRECO 3205 RIVER WINDS CT. MELBOURNE BEACH, FL. 32951	☑ 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	P WILLIS J. PHILLIPS 3134 RIVER VILLA WAY MELBOURNE BEACH, FL. 32951	☐ 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 (9/01)

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: Frank Greco REQUIRED FRANK GRECO-VICE PRESIDENT 321-729-6223
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #