

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 12, 2008 8:00 am
Secretary of State

05-12-2008 90029 017 ****61.25

DOCUMENT # 747223 1. Entity Name 850 BEACH ROAD CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 1 TURTLE BEACH ROAD VERO BEACH, FL 32963			Mailing Address 1 TURTLE BEACH ROAD VERO BEACH, FL 32963		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2027423	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent YOUNG, PETER H 1 TURTLE BEACH ROAD VERO BEACH, FL 32963			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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE 4/21/2008 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DILL, CHARLES 180 850 BEACH ROAD VERO BEACH, FL 32963	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS YOUNG, PETER H 1 TURTLE BEACH ROAD VERO BEACH, FL 32963	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Hoynes, Louis L. 500 Beach Road 311 Vero Beach, FL 32963
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BRUGH, BARBARA 850 BEACH RD # 280 VERO BEACH, FL 32963	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Plettner, William 850 Beach Road apt 377 Vero Beach, FL 32963
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P IRWIN, ROBERT H 850 BEACH RD #380 VERO BEACH, FL 32963	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Haas, Peter 500 Beach Road apt 306 Vero Beach, FL 32963
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS LANAHAN, RICHARD 1 TURTLE BEACH ROAD VERO BEACH, FL 32963	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS Gerstner, Larry C. 1 Turtle Beach, Road Vero Beach, FL 32963
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FAIRCHILD, ELIZABETH M 850 BEACH RD #177 VERO BEACH, FL 32963	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I am familiar with 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: <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date 4/21/08 Daytime Phone # _____	

RECEIVED

APR 28 2008

FILE MANAGEMENT