## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## **DOCUMENT # 750004 Secretary of State** 1. Entity Name 03-14-2006 90019 030 \*\*\*\*61.50 BEACH PLACE CONDOMINIUM ASSOCIATION, INC. Mailing Address Principal Place of Business 12901 GULF LANE MADEIRA BEACH FL 33708 US 10681 GULF BLVD TREASURE ISLAND FL 33706 2. Principal Place of Business 3. Mailing Address SAme JAme Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (10/05) 1st MOORE Ste 100 Applied For City & State City & State 4. FEI Number 59-2198855 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DITINNO, DENNIS Street Address (P.O. Box Number is Not Acceptable) 10681 GULF BLVD **STE 207** SAINT PETERSBURG FL 33706 City 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 Stgnature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10 ☐ Change ☐ Delete TITLE Addition THE Renneth white ACKLEX, BOB NAME NAME 2 ARIENES WAY 7 NORTH SUNSET BLVD STREET ADDRESS STREET ADDRESS CREAM Ridge, NJ 08514 **GULF BREEZE FL 32561** CITY-ST-ZIP CHY-ST-7IP TITLE ☐ Change Addition Delete TITLE GARY FERRACIANE GUINDON, RICHARD NAME NAME 5907 CummNOR W339-N5341 RD O STREET ADDRESS STREET ADDRESS NASHOTAH WI 53058 Westmont IL 60559 CITY-ST-71P CITY-ST-7IP Connie WAlker 4617 Dorchester LANE VΡ Addition XX Delete TITLE TITLE KOBIL, GERALD NAME NAME 118 W SOUTH BOUNDARY 102 Heathermoor STREET ADDRESS STREET ADDRESS LANC. CITY-ST-7IP PERRYSBURG OH 43551 CITY-ST-ZIP ☐ Delete TITLE ■ Addition TITLE ROCCO, JOHN NAME NAME STREET ADDRESS 5422 LORETA LANE STREET ADDRESS **CLAY NY 13041** CITY-SI-ZIP CITY-ST-ZIP 👿 Delete TITLE ☐ Channe Addition LYCKIAMI, SIMON NAME NAME 1005 SRISLEY ST STREET ADDRESS STREET ADDRESS NEW MARKET, ONTARIO, CANADA 13-4144 CITY-ST-ZIP CITY-ST-ZIP Addition Change TITLE Rensurer Delete TITLE ARMBRUSTER, WILLIAM NAME STREET ADDRESS 3906 SALMON DR STREET ADDRESS ORLANDO FL 32835 CITY-ST-ZIP CITY-ST-7IP

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report or supplemental reporters 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:

FILED

Mar 14, 2006 8:00 am