

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750004

FILED  
Jan 09, 2009  
Secretary of State

Entity Name: BEACH PLACE CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

12901 GULF LANE  
STE 100  
MADEIRA BEACH, FL 33708 US

## New Principal Place of Business:

## Current Mailing Address:

10681 GULF BLVD  
#207  
TREASURE ISLAND, FL 33706

## New Mailing Address:

12901 GULF LANE  
STE 100  
MADEIRA BEACH, FL 33708 US

FEI Number: 59-2198855

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DITINNO, DENNIS  
10681 GULF BLVD  
STE 207  
SAINT PETERSBURG, FL 33706 US

## Name and Address of New Registered Agent:

TOLLIVER, TIM  
12960 GULF BLVD  
MADEIRA BEACH, FL 33708 US

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: TIM TOLLIVER

01/09/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ACKLEY, BOB  
Address: 7 NORTH SUNSET BLVD  
City-St-Zip: GULF BREEZE, FL 32561

Title: D ( ) Delete  
Name: WHITE, KENNETH  
Address: 2 ARLENES WAY  
City-St-Zip: CREAM RIDGE, NJ 08514

Title: VP ( ) Delete  
Name: KOBIL, GERALD  
Address: 702 HEATHERMOOR LANE  
City-St-Zip: PERRYSBURG, OH 43551

Title: S ( ) Delete  
Name: SPILLERS, BILLY  
Address: 12901 GULF LANE 201  
City-St-Zip: SAINT PETERSBURG, FL 33708

Title: D ( ) Delete  
Name: BRIGGS, BOB  
Address: 1630 OLEY RIDGE CT  
City-St-Zip: TAMPA, FL 33609

Title: T ( ) Delete  
Name: ARMBRUSTER, WILLIAM  
Address: 3906 SALMON DR  
City-St-Zip: ORLANDO, FL 32835

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: WHITE, KENNETH  
Address: 2 ARLENES WAY  
City-St-Zip: CREAM RIDGE, NJ 08514

Title: T (X) Change ( ) Addition  
Name: ARMBRUSTER, BILL  
Address: 3966 SALMON DR  
City-St-Zip: ORLANDO, FL 32835

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: GUINDON, RICHARD  
Address: W339-N5341 ROAD O  
City-St-Zip: NASHOTAH, WI 53058

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIM TOLLIVER

RA

01/09/2009

Electronic Signature of Signing Officer or Director

Date