

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750004

FILED
Feb 08, 2012
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:

12901 GULF LANE
STE 100
MADEIRA BEACH, FL 33708 US

New Mailing Address:

FEI Number: 59-2198855 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: FREEMAN, CRAIG
Address: 8434 CASTLETON BLVD
City-St-Zip: INDIANAPOLIS, IN 46256 US

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

Title: VPD
Name: ACKLEY, BOB
Address: 7 NORTH SUNSET BLVD
City-St-Zip: GULF BREEZE, FL 32561 US

Title: SD
Name: SPILLERS, BILLY
Address: 12901 GULF LANE 201
City-St-Zip: SAINT PETERSBURG, FL 33708

Title: TD
Name: BREMER, FRANK
Address: 124 ROCKLAND RD.
City-St-Zip: TONAWANDA, NY 14150 US

Title: D
Name: FERRACANE, GARY
Address: 12924 GULF BLVD.
City-St-Zip: MADEIRA BEACH, FL 33708 US

I hereby 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 all other like empowered.

SIGNATURE: TIM S. TOLLIVER

MGR

02/08/2012

Electronic Signature of Signing Officer or Director

Date