2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750047

FILED Apr 13, 2004 Secretary of State

Entity Name: BEACH HOUSE OF JACKSONVILLE ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2180 W. SR 434 SUITE 5000

LONGWOOD, FL 32779 US

Current Mailing Address: New Mailing Address:

2180 W. SR 434 SUITE 5000

LONGWOOD, FL 32779 US

FEI Number: 59-3754801 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HART, JAMES W JR. SENTRY MANAGEMENT INC. 2180 W. SR 434, STE. 5000 LONGWOOD, FL 32779 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:

Flacture Complete of Decision 1 Asset

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: CORRAO, ROBERT Name: CORRAO, ROBERT Address: 101 SUMMER TREE STREET Address: 101 SUMMER TREE CT

City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: STD () Delete Title: STD (X) Change () Addition Name: ROSENBERG, JERRY Name: ROSENBERG, JERRY

 Address:
 8873 BELLE RIVE BLVD.
 Address:
 2369 JOSE CIR N

 City-St-Zip:
 JACKSONVILLE, FL 32256
 City-St-Zip:
 JACKSONVILLE, FL 32217

Title: D () Delete Title: D (X) Change () Addition Name: MICHAELS, A. J. Name: MOTLEY, R TERRELL

Address: 8873 BLLE RIVE BLVD. Name: MOTECT, RIVEREE

Address: 1401 S 1ST ST UNIT B

City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D (X) Delete Title: () Change () Addition

 Name:
 TERRELL, MOTLEY R
 Name:

 Address:
 1401 S 1ST ST #B
 Address:

 City-St-Zip:
 JACKSONVILLE BEACH, FL 32250
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBERT CORRAO PD 04/13/2004