

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

May 08, 2006 8:00 am
Secretary of State

04-17-2006 90387 036 ****61.25

DOCUMENT # 750358

1. Entity Name
NORTH BEACH CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
4201 NORTH OCEAN DRIVE
HOLLYWOOD, FL 33019 US

Mailing Address
C/O DEVELOPMENT CONSULTANTS INC.
2035 HARDING STREET, STE. 200
HOLLYWOOD, FL 33020

66015239



2. Principal Place of Business

3. Mailing Address
2035 Harding Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.
200

03282006 Chg-NP CR2E037 (11/05)

City & State

City & State
Hollywood, FL

4. FEI Number
59-2211467

Applied For
Not Applicable

Zip

Country

Zip
33020

Country
USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DEVELOPMENT CONSULTANTS INC.
2035 HARDING STREET, STE. 200
ATTN: ANDREW METROWITZ
HOLLYWOOD, FL 33020

Name Andrew Meyrowitz -c/o/DCI Association Services

Street Address (P.O. Box Number is Not Acceptable)
2035 Harding Street - Suite 200

City Hollywood FL Zip Code 33020

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$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 PD
NAME SCHMOHL, ROBERT ☒ Delete
STREET ADDRESS 4201 N OCEAN DR., #207
CITY-ST-ZIP HOLLYWOOD, FL 33019

TITLE David Bassing ☒ Change ☒ Addition
NAME
STREET ADDRESS 4201 N Ocean Dr., #306-A
CITY-ST-ZIP Hollywood, FL 33019

TITLE VPD
NAME SCHMOHL, ROBERT ☒ Delete
STREET ADDRESS 4201 N. OCEAN DR. #207
CITY-ST-ZIP HOLLYWOOD, FL 33019

TITLE VP
NAME Robert Waechter ☐ Change ☒ Addition
STREET ADDRESS 4201 N. Ocean Dr. #606
CITY-ST-ZIP Hollywood, FL 33019

TITLE SD
NAME EDWARDS, JOAN HALL ☐ Delete
STREET ADDRESS 4201 N OCEAN DR. # 307
CITY-ST-ZIP HOLLYWOOD, FL 33019

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE TD
NAME HANLEY, PATRICIA ☐ Delete
STREET ADDRESS 4201 N. OCEAN DR., #403
CITY-ST-ZIP HOLLYWOOD, FL 33019

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME EDWARDS, JOAN ☒ Delete
STREET ADDRESS 4201 N OCEAN DR., #307
CITY-ST-ZIP HOLLYWOOD, FL 33019

TITLE D
NAME John Benz ☐ Change ☒ Addition
STREET ADDRESS 4201 N. Ocean Dr. #601
CITY-ST-ZIP Hollywood, FL 33019

TITLE D
NAME HANLEY, STUART ☐ Delete
STREET ADDRESS 4201 N OCEAN DR., #403
CITY-ST-ZIP HOLLYWOOD, FL 33019

TITLE D
NAME Pamela Smith-Bassing ☐ Change ☒ Addition
STREET ADDRESS 4201 N. Ocean Drive #306A
CITY-ST-ZIP Hollywood, FL 33019

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #