

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750950

FILED
Jan 17, 2011
Secretary of State

Entity Name: BEACH PARKWAY VILLA 1 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1621 BEACH PKWY
CAPE CORAL, FL 33904 US

New Principal Place of Business:

Current Mailing Address:

C/O SILVERCRESTED MANAGEMENT LLC
P. O. BOX 1848
FORT MYERS, FL 33902 US

New Mailing Address:

FEI Number: 59-2173884 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SILVERCRESTED MANAGEMENT LLC
3436 MARINATOWN LANE
1ST FL UNIT 4
NORTH FORT MYERS, FL 33903 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: BOYD, MICHAEL
Address: 1627 BEACH PKWY 207
City-St-Zip: CAPE CORAL, FL 33904 US

Title: TD
Name: BAKER, GAIL
Address: 5935 WARBLER DRIVE
City-St-Zip: CLARKSTON, MI 48346 US

Title: VD
Name: IRVIN, JEANNE
Address: 1627 BEACH PARKWAY #106
City-St-Zip: CAPE CORAL, FL 33904 US

Title: D
Name: COCO, RICHARD
Address: 5938 NORTH OCONTO
City-St-Zip: CHICAGO, IL 60631 US

Title: SD
Name: BENNETT, DALE
Address: 624 TRUMAN LANE #105
City-St-Zip: BELLEVUE, KY 41073

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: MICHAEL BOYD

PD

01/17/2011

Electronic Signature of Signing Officer or Director

Date