

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90114 035 ****61.25

DOCUMENT # 754533

1. Entity Name
**BERKSHIRE-BY-THE-SEA CONDOMINIUM
ASSOCIATION, INC.**



Principal Place of Business
**126 N OCEAN BLVD
DELRAY BEACH, FL 33483**

Mailing Address
**126 N OCEAN BLVD
DELRAY BEACH, FL 33483**

40092140



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03122008

Chg-NP

CR2E037 (12/06)

City & State

City & State

4. FEI Number

59-2118671

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**ROBERT, HIGGINS G M
126 N OCEAN BLVD
DELRAY BEACH, FL 33483**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 2008**

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**SEC
AVERY, RALPH
7850 FAIRWAY TRAIL
BOCA RATON, FL 33487** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
GOLDSTEIN, ROBERT
6828 N. BARNETT LANE
MILWAUKEE, WI 53217** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
FLYNN, DENNIS P
3898 VIA POINCIANNA
LAKE WORTH, FL 33467** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
SPINELLI, PETER
20 MOSSFIELD RD.
NEWTON, MA 02468** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P,T
CAHALY, RICHARD
111 KENDALL ROAD
LEXINGTON, MA 02421** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
AVERY, RALPH
7850 FAIRWAY TRAIL
BOCA RATON, FL 33487** ☒ Change ☐ Addition

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
FLYNN, DENNIS P
3898 VIA POINCIANNA
LAKE WORTH, FL 33467** ☐ Change ☐ Addition

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
CAHALY, RICHARD
111 KENDALL RD
LEXINGTON, MA 02421** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**SD
GAWLER, ROBERT
7420 WESTLAKE TERRACE #1110
BETHESDA, MD 20817** ☐ Change ☒ Addition

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: *Robert Gawler* **Robert Gawler** **3/26/2008** **301-530-6753**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #