

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755219

FILED
Feb 01, 2009
Secretary of State

Entity Name: FLORIDANA BEACH CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

P O BOX 510214
MELBOURNE BEACH, FL 32951 US

New Principal Place of Business:

6635 S. HIGHWAY A1A
MELBOURNE BEACH, FL 32951 US

Current Mailing Address:

P O BOX 510214
MELBOURNE BEACH, FL 32951 US

New Mailing Address:

FEI Number: 59-2886796 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELLOTTE, JOHN R
6710 ANGELES ROAD
MELBOURNE BEACH, FL 32951 US

Name and Address of New Registered Agent:

JAEGER, KATHLEEN
104 ESTRELLA ROAD
MELBOURNE BEACH, FL 32951 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: KATHLEEN JAEGER

02/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: PHILLIPS, LISA
Address: 111 DELMAR STREET
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: TD () Delete
Name: AGIN, SUE ELLEN
Address: 6820 ANGELES RD
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: PD () Delete
Name: TOURTELLOTTE, JOHN R
Address: 6710 ANGELES RD
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: VD () Delete
Name: ANDERSON, RANDALL
Address: 110 DELESPINE STREET
City-St-Zip: MELBOURNE BEACH, FL 32951

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: JAEGER, KATHLEEN
Address: 104 ESTRELLA ROAD
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: VD (X) Change () Addition
Name: WILLIAMS, DARYL
Address: 6400 FLORIDANA AVENUE
City-St-Zip: MELBOURNE BEACH, FL 32951

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: SUE ELLEN AGIN

TD

02/01/2009

Electronic Signature of Signing Officer or Director

Date