2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755935

FILED Jan 14, 2009 Secretary of State

Entity Name: BEACHVIEW HOME OWNERS ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	E VIEW PT FL 33957	US		
Current Mailing Address:		New Mailing Address:		
PO BOX 79 SANIBEL,		US		
El Number:	: 01-0107385	FEI Number Applied For ()	FEI Number Not Applicable()	Certificate of Status Desired ()
Name and	Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:
788 BIRDIE	CHARLES W E VIEW PT FL 33957	US		
Γhe above	named entity	submits this statement for the		
	of Florida.	Submits this statement for the	purpose of changing its registere	d office or registered agent, or both,
n the State	e of Florida. RE:			d office or registered agent, or both,
n the State	e of Florida. RE:	nic Signature of Registered Ag		d office or registered agent, or both, Date
n the State	e of Florida. RE:	nic Signature of Registered Ag	ent	
n the State SIGNATUF DFFICERS Title: lame: kddress:	e of Florida. RE: Electro S AND DIREC	onic Signature of Registered Ag CTORS:) Delete NRLES IEW PT	ent	Date
n the State BIGNATUF DFFICERS Title: Name: Address: City-St-Zip: Vame: Name: Address:	e of Florida. RE: Electro S AND DIREC T (SPECHT, CHA 788 BIRDIE V SANIBEL, FL	enic Signature of Registered Agentors:) Delete RRLES 133957) Delete 5, SUE	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR
n the State	E of Florida. RE: Electro S AND DIREC T (SPECHT, CHA 788 BIRDIE V SANIBEL, FL P (MCDERMOTT 1222 PAR VIE SANIBEL, FL	nic Signature of Registered Agenomes:) Delete RLES IEW PT 33957) Delete W DR 33957) Delete BW DR	ent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR () Change () Addition

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: CHARLES W SPECHT T 01/14/2009