2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756861

FILED Apr 29, 2009 Secretary of State

Entity Name: BEACH ISLAND RESORT LESSEES ASSOCIATION, INC

Current Principal Place of Business: New Principal Place of Business:

1125 SOUTH ATLANTIC AVE. COCOA BEACH, FL 32931

Current Mailing Address: New Mailing Address:

1125 SOUTH ATLANTIC AVE. COCOA BEACH, FL 32931

FEI Number: 59-3097427 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ICARDI, JEFFREY A 2180 W. STATE RD 434 STE 6190

LONGWOOD, FL 32779 US

KLEMM, RUSSELL E ESQ. 1065 MAITLAND CENTER COMMONS BLVD.

MAITLAND, FL 32751 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: RUSSELL E. KLEMM, ESQ. 04/29/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT () Delete Title: DT (X) Change () Addition Name: HAWLEY, KENT Name: HAWLEY, KENT

 Name
 Name
 Name

 Address:
 6835 CAIRO RD
 Address:
 3650 RIGBY COURT

 City-St-Zip:
 COCOA, FL
 City-St-Zip:
 MOBILE, AL 36695

Title: PD () Delete Title: PD (X) Change () Addition Name: NEWCOMB, DAVID Name: NEWCOMB, DAVID

 Address:
 808 NASSAU
 Address:
 808 NASSAU

 City-St-Zip:
 COCOA BEACH, FL
 City-St-Zip:
 COCOA BEACH, FL
 32931

Title: DVP () Delete Title: DVPS (X) Change () Addition Name: THOMPSON, ANN Name: THOMPSON, ANN

Address: 3945 GROVEWOOD LANE Address: 3945 GROVEWOOD LANE City-St-Zip: TITUSVILLE, FL 32780

Title: DS () Delete Title: (X) Change () Addition HENDERSON, GARY WAYNE Name: JOHNSON, ROBERT L Name: Address: 50 BERKELEY ST APT B120 Address: 1125 S. ATLANTIC AVE. City-St-Zip: SATELLITE BEACH, FL 32937 City-St-Zip: COCOA BEACH, FL 32931

Title: D (X) Delete Title: () Change () Addition

 Name:
 HENDERSON, GARY WAYNE
 Name:

 Address:
 1125 S ATLANTIC AVE
 Address:

 City-St-Zip:
 COCOA BEACH, FL
 City-St-Zip:

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: ANN THOMPSON DVPS 04/29/2009

Electronic Signature of Signing Officer or Director

Date