

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758875

FILED
Apr 30, 2008
Secretary of State

Entity Name: SOUTH FLORIDA FREE BEACHES/FLORIDA NATURIST ASSOCIATION, INC.

Current Principal Place of Business:

1316 NE 105 STREET
SUITE 103
MIAMI SHORES, FL 331382129 US

New Principal Place of Business:

3650 NW 181 STREET
MIAMI, FL 33056 US

Current Mailing Address:

PO BOX 530306
MIAMI SHORES, FL 331530306 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MASON, RICHARD
1316 NE 105 STREET
STE. 104
MIAMI SHORES, FL 33138 US

Name and Address of New Registered Agent:

MASON, RICHARD
3650 NW 181 STREET
MIAMI, FL 33056 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: _____

04/30/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MASON, RICHARD
Address: 1316 N.E. 105 STREET #104
City-St-Zip: MIAMI SHORES, FL 33138

Title: D () Delete
Name: FRIDERICH, PAUL
Address: 2620 SE 5 COURT
City-St-Zip: POMPANO BEACH, FL 33062

Title: SD () Delete
Name: BAUM, DAVID
Address: 1709 NORTH 41 AVENUE
City-St-Zip: HOLLYWOOD, FL 33021

Title: VD () Delete
Name: MITCHELL, NORMA
Address: 3800 SW 142 AVE.
City-St-Zip: DAVIE, FL 33330

Title: D (X) Delete
Name: LOTT, CLYDE
Address: 1316 NE 105TH STREE #102
City-St-Zip: MIAMI SHORES, FL 33138

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MASON, RICHARD
Address: 3650 NW 181 STREET
City-St-Zip: MIAMI, FL 33056

Title: VD (X) Change () Addition
Name: MITCHELL, NORMA
Address: 3800 SW 142 AVE.
City-St-Zip: DAVIE, FL 33330

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

Title: TD (X) Change () Addition
Name: PANTALEON, ALBERT
Address: 100 BAYVIEW DRIVE, NO.2118
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: () Change () Addition
Name:
Address:
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: ALBERT PANTALEON

TD

04/30/2008

Electronic Signature of Signing Officer or Director

Date