2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT #759995

1. Entity Name
THE BARCLAY BEACH CLUB CONDOMINIUM
ASSOCIATION I, INC.



Principal Place of Business

Mailing Address

VERO BEACH, FL 3290	50 US	VERO BEACH, FL 32960 US						
2. Principal Place of Bus	siness - No P.O. Box #	3. Mailing Address						
Suite, Apt. #, etc.	<u></u>	Suite, Apt. #, etc.						
City & State		City & State						
Zip	Country	Zip	Country					

FILED Apr 09, 2007 8:00 am Secretary of State

04-09-2007 90066 016 ****61.25

C/O ELLIOTT 835 20TH P VERO BEACH	L	C/O 8 835	ELLIOTT MERRILL 20TH PL) BEACH, FL 32960	0 U:	S		 		1118 <u> 1</u> 118 1117 1116		E II ELLEN BY EN ELLE	
2. Principal Place of Business - No P.O. Box #		3. Mai	3. Mailing Address			_						
Suite, Apt. #, etc.		Suite, Apt. #, etc.				0222200	7 Çh	g-NP	CR2E0	37 (12/06)		
City & State		Cit	City & State				4. FEI Nun 59-26	nber 0207	7		⊢	oplied For ot Applicable
Zip	Country	Zip	Zip Co		intry		5. Certificate of		Status Desired		\$8.75 Additional Fee Required	
	d Agent			7. Name a	nd Addr	ess of New Re	gistered	Agent				
MEDDILL	ODAIO				Name							
MERRILL, 835 20TH	PL		Street Address			ddress (P.O. Box Nun	nber is N	lot Acceptable)	-		
VERO BE	ACH, FL 32960									<u></u>		
					City	_				FL	Zip Cod	le
	e named entity submits this statement for tions of registered agent.	or the purp	ose of changing its r	egister	ed office o	r register	red agent, or	both, in t	he State of Flor	ida. I am	familiar with,	, and accept
SIGNATURE			·				4.01					
	Signature, typed or printed name of registered agent	t and title if app	incable (NOTE	Registere	d Agent signa	lure required	t when reinstating)			DATE		
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees Make check payable to Florida Department of State					o			
	•						Added to Fe	es				tate
10.	•	RECTORS				_	Added to Fe	es		da Depa	rtment of S	
10.	OFFICERS AND DE	RECTORS		ontribut	ion.	_	Added to Fe	es CHANGE	Floric S TO OFFICER	S AND D	rtment of S	
TITLE NAME	OFFICERS AND DE TARANT, BILL	RECTORS	Trust Fund Co	11. TITLI	ion.	_	Added to Fe	es	Floric S TO OFFICER	S AND D	rtment of S	V 10
TITLE NAME STREET ADDRESS	OFFICERS AND DE VD TARANT, BILL 2800 NORTH A1A #1008	RECTORS	Trust Fund Co	11. THE	E E EET ADDRESS	_	Added to Fe	es CHANGE	Floric S TO OFFICER HHPH2	S AND D	rtment of S	V 10
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12. I hereby certify that the information supplied with this filling 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: