

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763109

FILED
May 01, 2007
Secretary of State

Entity Name: THE BEACH CONDOMINIUMS OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

8459 GULF BLVD
NAVARRE BEACH, FL 32566 US

New Principal Place of Business:

Current Mailing Address:

4092 ROCKY DRIVE
NICEVILLE, FL 32578 US

New Mailing Address:

FEI Number: 59-2573576 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ANKENEY, LARRY
4092 ROCKY DRIVE
NICEVILLE, FL 32578 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ANKENY, LARRY
Address: 4092 ROCKY DRIVE
City-St-Zip: NICEVILLE, FL 32578 US

Title: VPD () Delete
Name: COLEMAN, RALPH
Address: 4017 FAIRCHASE LANE
City-St-Zip: HOOVER, AL 35244 US

Title: SD () Delete
Name: OLIVER, RAYMOND
Address: 107 ADELE AVENUE
City-St-Zip: PITTSBURGH, PA 15233 US

Title: TD () Delete
Name: CANOVAI, CAROL
Address: 125 FOUST ROAD
City-St-Zip: GRAHAM, NC 27253 US

Title: D () Delete
Name: MAJEAU, WILLIAM
Address: 2041 EVERGLADES DRIVE
City-St-Zip: NAVARRE, FL 32566 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: LARRY ANKENY

PD

05/01/2007

Electronic Signature of Signing Officer or Director

Date