

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 12, 2004 8:00 am**  
**Secretary of State**

03-12-2004 90002 036 \*\*\*\*61.25

**DOCUMENT # 770102**

1. Entity Name

**BEACON 21 CONDOMINIUM "N THROUGH T"  
ASSOCIATION, INC.**



Principal Place of Business

**1421 NE 14TH COURT BOX 100  
JENSEN BEACH FL 34957**

Mailing Address

**PO BOX 1863  
PALM CITY FL 34991**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-2474508**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ZALBEN, JERRY  
J & J PERSONALIZED MANAGEMENT  
3665 F SW QUAIL MEADOW  
PALM CITY FL 34990**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25  
Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE VPD ☐ Delete  
NAME DEAN, ED  
STREET ADDRESS 1416 NE 14TH CT, T-49  
CITY-ST-ZIP JENSEN BEACH FL

TITLE D ☐ Delete  
NAME FARIO, EUGENE  
STREET ADDRESS 1441 14TH CT #N-1  
CITY-ST-ZIP JENSEN BEACH FL 34957

TITLE SD ☐ Delete  
NAME NALLY, GLORIA  
STREET ADDRESS 1461 NE 14TH CT, T-51  
CITY-ST-ZIP JENSEN BEACH

TITLE D ☒ Delete  
NAME DUBOIS, EILEEN  
STREET ADDRESS 1451 NE 14TH CT. #S-38  
CITY-ST-ZIP JENSEN BEACH FL 34957

TITLE DP ☐ Delete  
NAME SPRAUL, KATHRINE  
STREET ADDRESS 1421 NE 14TH CRT, BOX 100  
CITY-ST-ZIP JENSEN BEACH FL 34957

TITLE DT ☒ Delete  
NAME CONKLIN, BARBARA  
STREET ADDRESS 1421 NE 14TH CT, Q-22  
CITY-ST-ZIP JENSEN BEACH FL

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition  
NAME Carol Lucas  
STREET ADDRESS 1411 NE 14th CT # P11  
CITY-ST-ZIP Jensen Beach, FL 34957

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D, T ☐ Change ☒ Addition  
NAME Kathleen McKiver  
STREET ADDRESS 1431 NE 14th Court, R-36  
CITY-ST-ZIP Jensen Beach, FL 34957

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #