

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 771277

FILED
Mar 19, 2012
Secretary of State

Entity Name: BEACON SQUARE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

BEACON SQUARE
10553 PUTNAM CT
LEHIGH ACRES, FL 33936 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 946
LEHIGH ACRES, FL 33970 US

New Mailing Address:

FEI Number: 59-2371502

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALL, WILLIAM
10521 PUTNAM CT
LEHIGH ACRES, FL 33936 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: D
Name: HUFNAGEL, CARL DIR
Address: 10512 NEWBURY CT
City-St-Zip: LEHIGH ACRES, FL 33936 US

Title: VP&D
Name: HALL, WILLIAM PRES&D
Address: 10521 PUTNAM CT
City-St-Zip: LEHIGH ACRES, FL 33936 US

Title: S&D
Name: WALTERS, JANET SEC&D
Address: 10539 PUTNAM CT
City-St-Zip: LEHIGH ACRES, FL 33936 US

Title: D
Name: MOORE, DALE D
Address: 10425 NEW BEDFORD CT
City-St-Zip: LEHIGH ACRES, FL 33936 US

Title: P&D
Name: ROHLFING, VICKI VP&D
Address: 10579 ARLINGFORD BLVD
City-St-Zip: LEHIGH ACRES, FL 33936 US

Title: T
Name: SNYDER, BARABARA A TREAS
Address: 10506 NEWBURY CT
City-St-Zip: LEHIGH ACRES, FL 33936 US

I hereby 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 all other like empowered.

SIGNATURE: BARBARA A SNYDER

TRES

03/19/2012

Electronic Signature of Signing Officer or Director

Date