

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000122

FILED  
Mar 16, 2011  
Secretary of State

**Entity Name:** FIFTH AVENUE BEACH CLUB CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1719 TRADE CENTER WAY #4  
NAPLES, FL 34109

**New Principal Place of Business:**

**Current Mailing Address:**

1719 TRADE CENTER WAY #4  
NAPLES, FL 34109

**New Mailing Address:**

**FEI Number:** 59-3657347

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LUTZ, VERNA  
SANDCASTLE COMMUNITY MGMT, INC.  
1719 TRADE CENTER WAY, #4  
NAPLES, FL 34109 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: HARRIS, CHRISTOPHER  
Address: 1719 TRADE CENTER WAY, #4  
City-St-Zip: NAPLES, FL 34109

Title: PD  
Name: TATE, DEE DEE  
Address: 1719 TRADE CENTER WAY, #4  
City-St-Zip: NAPLES, FL 34109

Title: SD  
Name: DEMARCO, PATRICIA  
Address: 1719 TRADE CENTER WAY, #4  
City-St-Zip: NAPLES, FL 34109

Title: TD  
Name: HAUCK, ELIZABETH  
Address: 1719 TRADE CENTER WAY, #4  
City-St-Zip: NAPLES, FL 34109

Title: D  
Name: MCKENZIE, CHARLES  
Address: 1719 TRADE CENTER WAY, #4  
City-St-Zip: NAPLES, FL 34109

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:** DEE DEE TATE

PD

03/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date