

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 13, 2001 8:00 am
Secretary of State

04-13-2001 90038 031 ****70.00

DOCUMENT # N00000001078

1. Entity Name

BEACH WALK HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

**2300 CORPORATE BOULEVARD #112
 BOCA RATON FL 33431**

Mailing Address

**2300 CORPORATE BOULEVARD #112
 BOCA RATON FL 33431**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

301 Yamato Road

Suite, Apt. #, etc.

Suite 3191

City & State

Boca Raton FL

3. Mailing Address

301 Yamato Road

Suite, Apt. #, etc.

Suite 3191

City & State

Boca Raton FL

4. FEI Number

65-0994133

Applied For

Not Applicable

Zip

33431

Country

U.S.

Zip

33431

Country

U.S.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**KINSEY, JOHN T
 2300 CORPORATE BOULEVARD #112
 BOCA RATON FL 33431**

7. Name and Address of New Registered Agent

Name
John T. Kinsey
 Street Address (P.O. Box Number is Not Acceptable)
301 YAMATO ROAD
Suite 3191
 City
Boca Raton FL Zip Code
33431

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.

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**

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	KINSEY, JOHN T	
STREET ADDRESS	2300 CORPORATE BOULEVARD #112	
CITY-ST-ZIP	BOCA RATON FL 33431	
TITLE	SD	<input type="checkbox"/> Delete
NAME	GRAFF, DEBRA A	
STREET ADDRESS	2300 CORPORATE BOULEVARD #112	
CITY-ST-ZIP	BOCA RATON FL 33431	
TITLE	TD	<input type="checkbox"/> Delete
NAME	KINSEY, SUSAN M	
STREET ADDRESS	2300 CORPORATE BOULEVARD #112	
CITY-ST-ZIP	BOCA RATON FL 33431	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Kinsey, John T.	
STREET ADDRESS	301 YAMATO Rd., Suite 3191	
CITY-ST-ZIP	BOCA RATON, FL 33431	
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRAFF, Debra A.	
STREET ADDRESS	301 YAMATO Rd., Suite 3191	
CITY-ST-ZIP	BOCA RATON, FL 33431	
TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Kinsey, Susan M.	
STREET ADDRESS	301 YAMATO Rd., Suite 3191	
CITY-ST-ZIP	BOCA RATON, FL 33431	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 REQUIRED**

4-02-2001 (56) 994-8512

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E037 (10/00)