

**2003 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 30, 2003 8:00 am**  
**Secretary of State**

04-30-2003 90163 020 \*\*\*\*61.25

**DOCUMENT # N00000001078**

1. Entity Name

**BEACH WALK HOMEOWNERS ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

**BEACH WALK  
 FT. MYERS, FL 33908**

**c/o MATLAND ACCOUNTING  
 12995 S. CLEVELAND AVE  
 STE. 107  
 FT. MYERS, FL 33907**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

Applied For

**65-0994133**

Not Applicable

Zip

Country

Zip

Country

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

**KINSEY, JOHN T.  
 301 YAMATO ROAD, SUITE 3191  
 BOCA RATON, FL 33431**

Name  
**RUDOLPH K. MATLAND**  
 Street Address (P.O. Box Number is Not Acceptable)  
**12995 S. CLEVELAND AVENUE  
 SUITE 107**

City  
**FT. MYERS** **FL** Zip Code  
**33907**

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 **RUDOLPH K. MATLAND**

*Rudolph K. Matland*

**4/24/03**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KINSEY, JOHN T. 301 YAMATO ROAD SUITE 3191 BOCA RATON, FL 33431	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GRAFF, DEBRA A. 301 YAMATO ROAD SUITE 3191 BOCA RATON, FL 33431	<input type="checkbox"/> Delete <input checked="" type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KINSEY, SUSAN M. 301 YAMATO ROAD SUITE 3191 BOCA RATON, FL 33431	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TOMASI, GEORGE 15748 BEACHCOMBER AVE FT. MYERS, FL 33908	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BAILEY, LINDA 15596 BEACHCOMER AVE FT. MYERS, FL 33908	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MATLAND, RUDOLPH K. 11205 BEACH STROLL COURT FT. MYERS, FL 33908	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D O'BRIEN, JOHN 15649 BEACHCOMBER AVE FT. MYERS, FL 33908	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Rudolph K. Matland* *Treas*

**4/24/03**

**239-275-3436**

CR2E037 (9/99)