

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005086

FILED
Apr 25, 2006
Secretary of State

Entity Name: BEACHWAY AT NASSAU LAKE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

463499 SR 200
YULEE, FL 33097

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1987
YULEE, FL 320411987

New Mailing Address:

FEI Number: 59-3662757

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POWELL, TERRELL J
463499 SR 200
YULEE, FL 32097 US

Name and Address of New Registered Agent:

PROPERTY MANAGEMENT SYSTEMS INC.
463499 SR 200
YULEE, FL 32097 US

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: TERRELL J POWELL

04/25/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: AHL, WILLIAM L
Address: 96061 INLET COVE CT
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: ST () Delete
Name: GASKILL, GARY
Address: 966 S PARLIAMENT DR
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D () Delete
Name: DRAKE, PAUL D
Address: 96842 ARRIGO DR
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: AHL, WILLIAM L
Address: 96061 INLET COVE CT
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: PD (X) Change () Addition
Name: GASKILL, GARY
Address: 966 S PARLIAMENT DR
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD () Change (X) Addition
Name: EVANS, DOT
Address: 9614 CAUSEWAY PLACE
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: D () Change (X) Addition
Name: WEBB, GARY
Address: 9676 CAUSEWAY PLACE
City-St-Zip: FERNANDINA BEACH, FL 32034 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GARY GASKILL

PD

04/25/2006

Electronic Signature of Signing Officer or Director

Date