

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90467 018 ****61.25

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1. Entity Name
BEACH COLONY EAST CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**13597 PERDIDO KEY DR
PENSACOLA, FL 32507**

Mailing Address
**C/O STEPHENSON RESORT
PO BOX 34200
PENSACOLA, FL 32507**

60043140



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04242007

Chg-NP

CR2E037 (12/06)

4. FEI Number
59-3740107

Applied For

Not Applicable

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

**WOODWARD, MARK J
3200 TAMiami TRAIL NORTH
SUITE 200
NAPLES, FL 34103**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME STOKES, MARGARET M
STREET ADDRESS 13597 PERDIDO KEY DR UNIT 16B
CITY-ST-ZIP PENSACOLA, FL 32522

TITLE VD ☒ Delete
NAME GLASS, ANNA A
STREET ADDRESS 1600 WINGFIELD DR
CITY-ST-ZIP BIRMINGHAM, AL 35242

TITLE SD ☐ Delete
NAME DICKSON, LEWIS H JR
STREET ADDRESS 105 WATERFORD CIR
CITY-ST-ZIP LENOIR CITY, TN 37772

TITLE TD ☐ Delete
NAME BIRD, TONY
STREET ADDRESS 508 CARMENERE DR
CITY-ST-ZIP KENNER, LA 70065

TITLE D ☒ Delete
NAME KEITH, RANDY A
STREET ADDRESS 384 TAMARACK TR
CITY-ST-ZIP CANTON, GA 30115

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☐ Change ☒ Addition
NAME Griffon, Ray
STREET ADDRESS 13597 Perdido Key Dr, unit 11D
CITY-ST-ZIP Pensacola, FL 32507

TITLE VD ☒ Change ☐ Addition
NAME DICKSON, LEWIS H. JR.
STREET ADDRESS 2322 PAULY BROOK DR
CITY-ST-ZIP KNOXVILLE, TN 37932

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition
NAME Chandler, Bryan
STREET ADDRESS 10 N. Pinehurst Dr
CITY-ST-ZIP Tuscaloosa, AL 35401

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #