

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000007544

**FILED**  
**Apr 06, 2011**  
**Secretary of State**

**Entity Name:** BEACHSIDE AT ST. AUGUSTINE BEACH OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

115 A STREET  
ST AUGUSTINE, FL 32080

**New Principal Place of Business:**

**Current Mailing Address:**

PMB 196, 1093 A1A BEACH BLVD.  
ST AUGUSTINE, FL 32080

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

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

RINGHAVER, LAUREN C  
PMB 196, 1093 BEACH BLVD  
ST AUGUSTINE BEACH, FL 32080 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: DP  
Name: SWISSHELM, TOM  
Address: 6216 SW 84TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32608

Title: SD  
Name: DAHL, DALE  
Address: 115 A STREET  
City-St-Zip: ST AUGUSTINE, FL 32080

Title: DT  
Name: RINGHAVER, LAUREN  
Address: 812 A1A BEAH BLVD  
City-St-Zip: ST AUGUSTINE, FL 32080

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: LAUREN C. RINGHAVER

RA

04/06/2011

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

\_\_\_\_\_  
Date