

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02472

FILED
Jan 05, 2012
Secretary of State

Entity Name: THE BEACONS OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3342 E COUNTY HWY 30-A
#5
SANTA ROSA BEACH, FL 32459 US

New Principal Place of Business:

Current Mailing Address:

3342 E COUNTY HWY 30-A
SANTA ROSA BEACH, FL 32459 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LOFSTROM, CARL
3342 E COUNTY HWY 30-A
#5
SANTA ROSA BEACH, FL 32459 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: PD
Name: LOFSTROM, CARL
Address: 3342 E HWY 30-A #5
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

Title: D
Name: HIGDON, SANDRA
Address: P.O. BOX 13088
City-St-Zip: TALLAHASSEE, FL 32317 US

Title: DT
Name: LOFSTROM, HAEYOUNG
Address: 3342 E HWY 30-A #5
City-St-Zip: SANTA ROSA BEACH, FL 32459 US

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: CARL LOFSTROM

PD

01/05/2012

Electronic Signature of Signing Officer or Director

Date