


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # N03000006186 1. Entity Name BEACH AREA CITIZENS ASSOCIATION, INC.	
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Principal Place of Business 423 HERMOSITA DRIVE ST. PETE BEACH, FL 33706 US	Mailing Address 423 HERMOSITA DRIVE ST. PETE BEACH, FL 33706 US
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DO NOT WRITE IN THIS SPACE



04232005 No Chg-NP CR2E037 (10/03)

4. FEI Number 91-2198710	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROTHENBERGER, DANIEL W
423 HERMOSITA DRIVE
ST. PETE BEACH, FL 33706

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IN THIS SPACE**

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:  DATE: 4.23.05

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROTHENBERGER, DANIEL W 423 HERMOSITA DRIVE ST. PETE BEACH, FL 33706
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROTHENBERGER, DEBORAH A 423 HERMOSITA DRIVE ST. PETE BEACH, FL 33706
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LANG, DAVID 243 HERMOSITA DRIVE ST. PETE BEACH, FL 33706
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRIGGS, MICHAEL 482 HERMOSITA DRIVE ST. PETE BEACH, FL 33706
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000358671
05/04/05-80124-014 70.00

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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:  Deborah Rothenberger 4.23.05 (727) 360-6836

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #