

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007203

FILED
Apr 11, 2007
Secretary of State

Entity Name: BEACH BAY VILLAS CONDOMINIUM ASSOCIATION,INC.

Current Principal Place of Business:

2930 DEL PRADO BLVD S SUITE B
CAPE CORAL, FL 33904

New Principal Place of Business:

Current Mailing Address:

2930 DEL PRADO BLVD S SUITE B
CAPE CORAL, FL 33904

New Mailing Address:

FEI Number: 20-0712297

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SORENSEN, CATHY J
SORENSEN REALTY, INC.
2930 DEL PRADO BLVD, S SUITE B
CAPE CORAL, FL 33904 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 () Delete
Name: BROCK, DAVID
Address: 1640 BEACH PKWY #204
City-St-Zip: CAPE CORAL, FL 33904

Title: VD () Delete
Name: HAYES, SUSAN
Address: 1640 BEACH PKWY #201
City-St-Zip: CAPE CORAL, FL 33904

Title: STD () Delete
Name: KAY, SHERRY
Address: 1640 BEACH PKWY #204
City-St-Zip: CAPE CORAL, FL 33904

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ARENA, ANTHONY
Address: 2101 MT READ BLVD
City-St-Zip: ROCHESTER, NY 14615

Title: VD (X) Change () Addition
Name: HAGAN, DIANA
Address: 1640 BEACH PKWY #101
City-St-Zip: CAPE CORAL, FL 33904

Title: STD (X) Change () Addition
Name: JAMES, OBRENSKI
Address: W190S7402 BAYSHORE DRIVE
City-St-Zip: MUSKEGO, WI 53150

Title: D () Change (X) Addition
Name: HAYES, SUSAN
Address: 1640 BEACH PKWY #201
City-St-Zip: CAPE CORAL, FL 33904

Title: D () Change (X) Addition
Name: KAY, SHERRY
Address: 1640 BEACH PKWY #204
City-St-Zip: CAPE CORAL, FL 33904

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: SUSAN HAYES

D

04/11/2007

Electronic Signature of Signing Officer or Director

Date