

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 23, 2007  
Secretary of State**

DOCUMENT# N04000010194

Entity Name: 59TH STREET BEACH CLUB CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

7447 ARLINGTON AVENUE NW  
MASSILLON, OH 44646

**New Principal Place of Business:**

**Current Mailing Address:**

7447 ARLINGTON AVENUE NW  
MASSILLON, OH 44646

**New Mailing Address:**

FEI Number: 20-2503443      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SCHREINER, MICHAEL D  
307 59TH STREET  
A  
HOLMES BEACH, FL 34217 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: DPVS ( ) Delete  
Name: SCHREINER, MICHAEL  
Address: 7447 ARLINGTON AVENUE NW  
City-St-Zip: MASSILLON, OH 44646

Title: D ( ) Delete  
Name: SCHREINER, BRENDA  
Address: 7447 ARLINGTON AVENUE NW  
City-St-Zip: MASSILLON, OH 44646

Title: D (X) Delete  
Name: BYRNE, RICHARD  
Address: PO BOX 1247  
City-St-Zip: HOLMES BEACH, FL 34217

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: MICHAEL D. SCHREINER

DPVS

01/23/2007

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

\_\_\_\_\_  
Date