

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000010223

**FILED**  
**Mar 30, 2010**  
**Secretary of State**

**Entity Name:** SOUTH BEACH HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

11360 GULF BOULEVARD  
TREASURE ISLAND, FL 33706

**New Principal Place of Business:**

**Current Mailing Address:**

19535 GULF BLVD  
SUITE E  
INDIAN SHORES, FL 33785

**New Mailing Address:**

**FEI Number:** 20-1876946

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CONDO MANAGEMENT PLUS  
19535 GULF BLVD  
SUITE E  
INDIAN SHORES, FL 33785 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: P  
Name: HAVEMAN, LARRY  
Address: 19535 GULF BLVD E  
City-St-Zip: INDIAN SHORES, FL 33785

Title: VP  
Name: JOHNSON, CURT  
Address: 19535 GULF BLVD E  
City-St-Zip: INDIAN SHORES, FL 33785

Title: ST  
Name: BYRNE, GAIL  
Address: 19535 GULF BLVD E  
City-St-Zip: INDIAN SHORES, FL 33785

Title: D  
Name: LUCKETT, BOB  
Address: 19535 GULF BLVD E  
City-St-Zip: INDIAN SHORES, FL 33785

Title: D  
Name: BELL, DANIEL  
Address: 19535 GULF BLVD E  
City-St-Zip: INDIAN SHORES, FL 33785

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: JOYCE ADAMS

LCAM

03/30/2010

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

\_\_\_\_\_  
Date