

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04277

FILED
Mar 20, 2009
Secretary of State

Entity Name: THE BEACHCOMBER II OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

411 1ST ST S
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

Current Mailing Address:

411 1ST ST S
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

FEI Number: 20-2049919

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, THOMAS
411 FIRST ST., SOUTH
SUITE 204
JACKSONVILLE BEACH, FL 32250 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: PTD () Delete
Name: SMITH, THOMAS TREAS
Address: 411 FIRST ST. S, UNIT 204
City-St-Zip: JACKSONVILLE BCH, FL 32250

Title: D () Delete
Name: BEARLY, DAVID PRES
Address: 411 1ST ST S, UNIT 402
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D () Delete
Name: SMITH, THOMAS SECT
Address: 411 1SR ST S, UNIT 204
City-St-Zip: JACKSONVILLE BCH, FL 32250

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 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: THOMAS SMITH

PTD

03/20/2009

Electronic Signature of Signing Officer or Director

_____ Date