2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002431

FILED Apr 08, 2009 Secretary of State

Entity Name: BEACH LANDINGS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

ROSSMAN REALTY PROPERTY MGMT LLC 1104 SE 46TH LANE #2 CAPE CORAL, FL 33904

Current Mailing Address: New Mailing Address:

ROSSMAN REALTY PROPERTY MGMT LLC 1104 SE 46TH LANE #2 CAPE CORAL, FL 33904

FEI Number: 59-1501728 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ROSSMAN, MICHELLE CAM ROSSMAN PROPERTY MGMT LLC 1104 SE 46TH LANE #2 CAPE CORAL, FL 33904 US

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:

Date

Title:

Name:

Address:

City-St-Zip:

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

POWELL, MARJORIE

CHISHOLM, DAN

390 GOODRICH ST

VD

CAPE CORAL, FL 33904

LUNENBERG, MA 01462

1708 BEACH PARKWAY #202

(X) Change () Addition

(X) Change () Addition

() Delete POWELL, MARJORIE Name: Name: 912 S.E. 46TH LANE, SUITE 201 Address: Address: City-St-Zip:

City-St-Zip: CAPE CORAL, FL 33904

OFFICERS AND DIRECTORS:

Title: VD () Delete Name: CHISHDIM, DAN Address: 390 GOODRICH ST City-St-Zip: LUNENBERG, MA 04162

Title: STD () Delete Title: STD (X) Change () Addition

DANKERT, WILLIAM Name: DANKERT, WILLIAM Name: 7606 S. YOUNG ROAD Address: 7605 S. YOUNG ROAD Address: City-St-Zip: LA PORTE, IN 46350 City-St-Zip: LA PORTE, IN 46350

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: MICHELLE ROSSMAN, CAM CAM 04/08/2009