

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 17, 2007 8:00 am
Secretary of State

04-17-2007 90058 042 ****61.25

DOCUMENT # N05000010853

1. Entity Name

BEACH BOULEVARD PROPERTY OWNERS' ASSOCIATION, INC.



Principal Place of Business

**1202 BEACH BLVD
SUN CITY CENTER FL 33573**

Mailing Address

**1202 BEACH BLVD
SUN CITY CENTER FL 33573**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HINES, JAMES P JR
315 S. HYDE PARK AVE.
TAMPA FL 33606**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME TURNER, WILLIAM H
STREET ADDRESS 1202 BEACH BLVD
CITY-ST-ZIP SUN CITY CENTER FL 33573

TITLE VD ☐ Delete
NAME BLAKE, HOWARD A
STREET ADDRESS 1106 BEACH BLVD
CITY-ST-ZIP SUN CITY CENTER FL 33573

TITLE STD ☒ Delete
NAME BROTHERS, JEANNE
STREET ADDRESS 1108 BEACH BLVD
CITY-ST-ZIP SUN CITY CENTER FL 33573

TITLE D ☒ Delete
NAME HENDERSON, MERLE W
STREET ADDRESS 1202 BEACH BLVD
CITY-ST-ZIP SUN CITY CENTER FL 33573

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☒ Change ☐ Addition
NAME KEVALA, RUSS J.
STREET ADDRESS 1932 NEW BEDFORD DR
CITY-ST-ZIP SUN CITY CENTER, FL 33573

TITLE TD ☒ Change ☐ Addition
NAME KYNE, HAROLD
STREET ADDRESS 13650 SAN RAFAEL
CITY-ST-ZIP LARGO, FL 33774

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

R. J. Kevala

RUSS J. KEVALA, Secretary

4/3/07

813-634-0933

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #