2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008
Secretary of State

DOCUMENT# N05000011288

Entity Name: THE BEACH RESIDENCES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1300 BEN FRANKLIN DRIVE
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

1300 BEN FRANKLIN DRIVE
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 20-3936403 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SPENCER, MARC I
877 EXECUTIVE CENTER DR. W.
SUITE 205
ST. PETERSBURG, FL 337022472 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:	PD	( ) Delete
Name:	GAGNE, ROBERT	
Address:	1300 BEN FRANKLIN DRIVE, UNIT 601	
City-St-Zip:	SARASOTA, FL 34236	
Title:	VD	( ) Delete
Name:	BUNDRANT, SCOTT	
Address:	1300 BEN FRANKLIN DRIVE, UNIT 1103	
City-St-Zip:	SARASOTA, FL 34236	
Title:	V	( ) Delete
Name:	WESTENDORF, NEAL	
Address:	1300 BEN FRANKLIN DRIVE, UNIT 604	
City-St-Zip:	SARASOTA, FL 34236	
Title:	VST	( ) Delete
Name:	HUNTER, ROBERT	
Address:	1300 BEN FRANKLIN DRIVE, UNIT 705	
City-St-Zip:	SARASOTA, FL 34236	
Title:	AS	( ) Delete
Name:	PRICE, CLINTON SR	
Address:	1300 BEN FRANKLIN DRIVE, UNIT 802	
City-St-Zip:	SARASOTA, FL 34236	

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:	
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: ROBERT D. HUNTER VST 05/02/2008

Electronic Signature of Signing Officer or Director — Date