

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003247

FILED
Apr 26, 2010
Secretary of State

Entity Name: BEACON LAKES PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O AMB CODINA BEACON LAKES, LLC
2855 LEJEUNE ROAD, 4TH FLOOR
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

C/O AMB CODINA BEACON LAKES, LLC
2855 LEJEUNE ROAD, 4TH FLOOR
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 20-5743674 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

COBB, KOLLEEN O.P.
2855 LEJEUNE ROAD
4TH FLOOR
CORAL GABLES, FL 33134 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: T
Name: GODOY, RUSTY
Address: 2855 LEJEUNE ROAD, 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: P
Name: LATTA, BRIAN
Address: 2855 LEJEUNE ROAD, 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: VP
Name: SMITH, MARK
Address: 2855 LEJEUNE ROAD, 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: S
Name: KRONGER, BRIAN
Address: 2855 LEJEUNE ROAD, 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33134

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: RUSTY GODOY

T

04/26/2010

Electronic Signature of Signing Officer or Director

Date