

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007015

FILED
Mar 16, 2009
Secretary of State

Entity Name: BEACH TO BAY VIEW TOWNHOMES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

103B 5TH STREET SOUTH
BRADENTON BEACH, FL 34217

New Principal Place of Business:

Current Mailing Address:

PO BOX 2075
HOLMES BEACH, FL 34218

New Mailing Address:

FEI Number: 33-1140389

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GREENE, ROBERT F. ESQ.
1301 6TH AVE. WEST, STE. 400
BRADENTON, FL 34205 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: DP () Delete
Name: NEWELL, RICHARD T
Address: 11 BALDWIN LANE
City-St-Zip: HOLLIS, NH 03049

Title: DST () Delete
Name: NEWELL, HANNELORE
Address: 11 BALDWIN LANE
City-St-Zip: HOLLIS, NH 03049

Title: D () Delete
Name: PHILLIPS, REGINALD
Address: 2402 SOUTH 18TH ST.
City-St-Zip: CHARLESTON, IL 61920

Title: D () Delete
Name: PHILLIPS, MARTHA
Address: 2402 SOUTH 18TH ST.
City-St-Zip: CHARLESTON, IL 61920

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:

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: RICHARD T. NEWELL

DP

03/16/2009

Electronic Signature of Signing Officer or Director

Date