2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2009
Secretary of State

DOCUMENT# N06000010795

Entity Name: CHURCH FOR THE BEACH, INC.

Current Principal Place of Business:

1194 YACHT CLUB BOULEVARD
INDIAN HARBOR BEACH, FL 32937

New Principal Place of Business:

Current Mailing Address:

1194 YACHT CLUB BOULEVARD
INDIAN HARBOR BEACH, FL 32937

New Mailing Address:

FEI Number: 20-5751857 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAPLE, JAMES C
1194 YACHT CLUB BLVD
INDIAN HARBOR BEACH, FL 32937 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: WASHBURN, B SCOTT
Address: 244 CORAL WAY WEST
City-St-Zip: INDIALANTIC, FL 32903

Title: VPD ( ) Delete
Name: CAPLE, JAMES C
Address: 1194 YACHT CLUB DRIVE
City-St-Zip: INDIAN HARBOR BEACH, FL 32937

Title: STD ( ) Delete
Name: FADDEN, CHRISTOPHER J
Address: 424 FOURTH AVENUE
City-St-Zip: INDIALANTIC, FL 32903

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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: MGRM ( ) Change (X) Addition
Name: HEYNE, ROBERT
Address: 436 ARUBA COURT
City-St-Zip: SATELLITE BEACH, FL 32937

Title: MGRM ( ) Change (X) Addition
Name: JASON, PALMISANO A
Address: 537 OAKRIDGE DRIVE
City-St-Zip: INDIALANTIC, FL 32903

Title: MGRM ( ) Change (X) Addition
Name: WILLIAM, TWEEDDALE JR
Address: 110 MAR LEN DRIVE
City-St-Zip: MELBOURNE BEACH, FL 32951

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: JIM CAPLE VPD 04/06/2009
Electronic Signature of Signing Officer or Director — Date