2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 14, 2008 8:00 am
Secretary of State
05-14-2008 90021 008 ****61.25

DOCUMENT # N07087

1. Entity Name

BEACH VILLAS CONDOMINIUM PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
7092 PLACIDA RD CAPE HAZE FL 33946 US	7092 PLACIDA RD CAPE HAZE FL 33946 US

1st MOORE CR2E037 (10/07)

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 59-2574888 ☐ 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
REMOUR, CRAIG 7092 PLACIDA RD. CAPE HAZE FL 33946	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, 2008

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P FINK, RICHARD 337 WEST MAIN ST STE 200 BARRINGTON IL 60010	☐ Delete	D SIMS, WILSON 10140 S. WEST 59TH AVE PINECREST, FL 33156	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T LAPE, PHILIP PO BOX 71 SORRENTO ME 04677	☒ Delete	D FLISS, TOM 705 S W 51 TERR. CAPE CORAL, FL 33914	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S ATHANASSIADES, DEAN 1163 LANIER BLVD ATLANTA GA 30306	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~AS~~ WOODWORTH, POLLY PO BOX 2035 EAST DENNIS MA 02641	☐ Delete	VP WOODWORTH, POLLY PO BOX 2035 EAST DENNIS, MA. 02641	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FOSTER, JULIAN 31234 8TH AVE EAST BRADENTON FL 34203-3976	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~D~~ NUCKOLS, ROBERT 1040 ~~MATE CUMBER~~ KEY RD PUNTA GORDA FL 33955	☐ Delete	T NUCKOLS, BOB 24351 BALTIC AVE, UNIT. 201 PUNTA GORDA, FL. 33955	☒ Change ☐ Addition

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: CRAIG A. REMOUR