

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07087

FILED
Mar 31, 2010
Secretary of State

Entity Name: BEACH VILLAS CONDOMINIUM PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

7092 PLACIDA ROAD
CAPE HAZE, FL 33946 US

New Principal Place of Business:

Current Mailing Address:

7092 PLACIDA ROAD
CAPE HAZE, FL 33946 US

New Mailing Address:

FEI Number: 59-2574888

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REMOUR, CRAIG A
7092 PLACIDA ROAD
CAPE HAZE, FL 33946 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: P
Name: FINK, RICHARD
Address: P O BOX 3157
City-St-Zip: BARRINGTON, IL 60011 US

Title: VP
Name: WOODWORTH, MARGARET
Address: P O BOX 2035
City-St-Zip: EAST DENNIS, MA 02641 US

Title: S
Name: ATHANASSIADES, DEAN
Address: 1163 LANIER BLVD
City-St-Zip: ATLANTA, GA 30306 US

Title: T
Name: NUCKOLS, ROBERT
Address: 24351 BALTIC AVENUE, UNIT #201
City-St-Zip: PUNTA GORDA, FL 33955 US

Title: D
Name: ROUM, CHARLES
Address: 642 WATERS EDGE DRIVE
City-St-Zip: WHITEWATER, WI 53190 US

Title: D
Name: SIMS, WILSON
Address: 10140 S WEST 59TH AVENUE
City-St-Zip: PINECREST, FL 33156 US

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: CRAIG A REMOUR

MGR

03/31/2010

Electronic Signature of Signing Officer or Director

Date