

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003808

FILED
Apr 13, 2009
Secretary of State

Entity Name: BEACH COLONY RESORT ON NAVARRE, WEST, CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3200 TAMIAMI TRAIL NORTH, SUITE 200
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

3200 TAMIAMI TRAIL NORTH, SUITE 200
NAPLES, FL 34103

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WOODWARD, MARJ J ESQ.
3200 TAMIAMI TRAIL NORTH, SUITE 200
NAPLES, FL 34103 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: CIANO, DEBRA
Address: 440 BAYFRONT PKWY
City-St-Zip: PENSACOLA, FL 32502

Title: VD () Delete
Name: BEATTIE, CLIVE
Address: 13601 PERDIDO KEY DR.
City-St-Zip: PENSACOLA, FL 32507

Title: STD () Delete
Name: ABFALLAH, LISA
Address: 13601 PERDIDO KEY DR.
City-St-Zip: PENSACOLA, FL 32507

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CIANO, DEBRA
Address: 8501 GULF BLVD
City-St-Zip: NAVARRE, FL 32566

Title: VD (X) Change () Addition
Name: BEATTIE, CLIVE
Address: 8501 GULF BLVD
City-St-Zip: NAVARRE, FL 32566

Title: STD (X) Change () Addition
Name: ABFALLAH, LISA
Address: 8501 GULF BLVD
City-St-Zip: NAVARRE, FL 32566

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: DEBRA CIANO

P

04/13/2009

Electronic Signature of Signing Officer or Director

Date