

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2008 8:00 am
Secretary of State

01-24-2008 90046 007 ****61.25

DOCUMENT # N08247

1. Entity Name
BEACH COLONY CLUB, INC.



Principal Place of Business
**7400 MONACO
MIAMI, FL 33143 US**

Mailing Address
**7400 MONACO
MIAMI, FL 33143 US**

40009870



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

01212008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2756172

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

**CORBITT, RONALD E JR
7400 MONACO STREET
CORAL GABLES, FL 33143**

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

**Filing 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 **P** ☒ Delete
NAME **WHEELER, WILLARD**
STREET ADDRESS **10000 OLD CUTLER RD**
CITY-ST-ZIP **CORAL GABLES, FL 33150**

TITLE **P** ☒ Change ☐ Addition
NAME **Robert Lowman**
STREET ADDRESS **17302 SW 78th Place**
CITY-ST-ZIP **Palmetto Bay, Fla 33157**

TITLE **TD** ☐ Delete
NAME **CORBITT, RONALD E**
STREET ADDRESS **7400 MONACO STREET**
CITY-ST-ZIP **CORAL GABLES, FL 33143**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SD** ☐ Delete
NAME **BLACKWELL, STIEGLITZ**
STREET ADDRESS **8820 SCHOOLHOUSE RD**
CITY-ST-ZIP **CORAL GABLES, FL 33156**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **BEROUNSKY, EDWARD**
STREET ADDRESS **6211 PARADISE POINT DR**
CITY-ST-ZIP **PALMETTO BAY, FL 33157**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **TROMBINO, ROGER**
STREET ADDRESS **14501 SW 79 AVE**
CITY-ST-ZIP **MIAMI, FL 33158**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **BELL, DAN**
STREET ADDRESS **100 CASUARINA CONCOURSE**
CITY-ST-ZIP **CORAL GABLES, FL 33143**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**RONALD E CORBITT JR 954-328-9967
TREASURER JAN 22, 2008**