2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N09741 Apr 25, 2011
Secretary of State

Entity Name: BEACHES EMERGENCY ASSISTANCE MINISTRY, INC.

Current Principal Place of Business: New Principal Place of Business:

850 6TH AVENUE SOUTH STE 400 JACKSONVILLE BEACH, FL 32250 US

Current Mailing Address: New Mailing Address:

850 SIXTH AVENUE SOUTH STE 400 JACKSONVILLE BEACH, FL 32250 US

FEI Number: 59-2564222 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LINGER, DAVID M 302 THIRD ST., SUITE 5 NEPTUNE BEACH, FL 32266 US

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: ED

 Name:
 SOUTHWELL, VIVIAN

 Address:
 119 SEA HAMMOCK WAY

 City-St-Zip:
 PONTE VEDRA BEACH, FL 32082

Title: P

Name: LAMBERT, PAUL

Address: 307 OCEANFRONT DRIVE N City-St-Zip: ATLANTIC BEACH, FL 32233

Title: VP

Name: KIERNAN, JANICE

Address: 1350 13TH AVENUE SOUTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: 5

Name: ROGERS, JOSH

Address: 9919 VINEYARD LAKE LANE City-St-Zip: JACKSONVILLE, FL 32256

Title: TD

Name: TAYLOR, SUSAN

Address: 603 15TH STREET NORTH
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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: VIVIAN SOUTHWELL ED 04/25/2011