

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11450

FILED  
Apr 05, 2008  
Secretary of State

**Entity Name:** BEACH PARK TERRACE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3819 WEST HORATIO STREET  
#10  
TAMPA, FL 336093969 US

**New Principal Place of Business:**

**Current Mailing Address:**

3819 WEST HORATIO STREET  
#10  
TAMPA, FL 336093969 US

**New Mailing Address:**

3819 WEST HORATIO STREET  
#6  
TAMPA, FL 336093969 US

**FEI Number:** 59-2678555

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WICHTERMAN, JUDY  
3819 HORATIO ST  
#6  
TAMPA, FL 33609 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: ARANGO, AL  
Address: 3819 W HORATIO ST, #10  
City-St-Zip: TAMPA, FL 33609

Title: STD ( ) Delete  
Name: WICHTERMAN, JUDY  
Address: 3819 W HORATIO ST #6  
City-St-Zip: TAMPA, FL 33609

Title: VP ( ) Delete  
Name: HOLMES, PATRICIA  
Address: 3819 W HORATIO ST ST #4  
City-St-Zip: TAMPA, FL 33609

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JUDY WICHTERMAN

STD

04/05/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date