

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16603

FILED
Apr 01, 2009
Secretary of State

Entity Name: THE CONDOMINIUM ASSOCIATION FOR THE BEACH PLACE, INC.

Current Principal Place of Business:

177 N GULF BLVD.
PLACIDA, FL 33946

New Principal Place of Business:

Current Mailing Address:

9251 PINE COVE RD
ENGLEWOOD, FL 34224

New Mailing Address:

108 CAMPBELL DR.
WINTER HAVEN, FL 33882

FEI Number: 59-1987952

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IRBY, WILLIAM D
9251 PINE COVE BLVD
ENGLEWOOD, FL 34224 US

Name and Address of New Registered Agent:

SATERBO, STEVE
108 CAMPBELL DR.
WINTER HAVEN, FL 33882 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: STEVE SATERBO

04/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NUTTLE, TED H
Address: 505 WILLOWHURST PL
City-St-Zip: LOUISVILLE, KY 40223

Title: SD () Delete
Name: BERGIN, MARY M
Address: 202 BEAR RIDGE COURT
City-St-Zip: SAFETY HARBOR, FL 34695

Title: TD () Delete
Name: IRBY, DAVID
Address: 9251 PINE COVE RD
City-St-Zip: ENGLEWOOD, FL 34224

Title: VD () Delete
Name: KRUEGER, RICK
Address: 140 S PINE AVE
City-St-Zip: OLDSMAR, FL 34677

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SATERBO, STEVE
Address: 108 CAMPBELL DR.
City-St-Zip: WINTER HAVEN, FL 33882 US

Title: SD (X) Change () Addition
Name: KRUEGER, ANGELA
Address: 140 SOUTH PINE AVE.
City-St-Zip: OLDSMAR, FL 34677 US

Title: TD (X) Change () Addition
Name: IRBY, DAVID
Address: 9251 PINE COVE RD
City-St-Zip: ENGLEWOOD, FL 34224 US

Title: VD (X) Change () Addition
Name: DEVOY, ROBERT T JR
Address: 625 S. SKINKER BLVD
City-St-Zip: ST. LOUIS, MO 63105 US

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: STEVE SATERBO

PD

04/01/2009

Electronic Signature of Signing Officer or Director

Date