

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17302

FILED
Apr 09, 2009
Secretary of State

Entity Name: BEACHWALK RESIDENTS ASSOCIATION, INC.

Current Principal Place of Business:

MGMT. BY ASSOC. INC
2685 HORSESHOE DR. S #215
NAPLES, FL 34104 US

New Principal Place of Business:

MGMT. BY ASSOC. INC
187 FOREST LAKES BLVD.
NAPLES, FL 34105 US

Current Mailing Address:

C/O RESORT MANAGEMENT
187 FOREST LAKES BLVD.
NAPLES, FL 34104 US

New Mailing Address:

C/O MANAEMENT BY ASSOCIATION, INC
187 FOREST LAKES BLVD.
NAPLES, FL 34105 US

FEI Number: 59-2745854

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRACEY, ROERT T JR
187 FOREST LAKES BLVD.
NAPLES, FL 34105 US

Name and Address of New Registered Agent:

GRACEY, ROERT T SR
187 FOREST LAKES BLVD.
NAPLES, FL 34105 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: ROBERT T. GRACEY

04/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DVP () Delete
Name: WENDELL, MARTY
Address: 810 REEF POINT CIR
City-St-Zip: NAPLES, FL 34108

Title: DS () Delete
Name: HERBST, JAMES
Address: 837 REEF POINT CIR
City-St-Zip: NAPLES, FL 34108

Title: DT () Delete
Name: CHRISTENSEN, JON
Address: 637 BEACHWALK CIR #E204
City-St-Zip: NAPLES, FL 34108

Title: D () Delete
Name: STONER, DONALD
Address: 817-H93 REEF POINT CIR
City-St-Zip: NAPLES, FL 34108

Title: D () Delete
Name: LISSMAN, ALAN
Address: 513-V53 BEACHWALK CIR
City-St-Zip: NAPLES, FL 34108

Title: P () Delete
Name: MCCARTHY, RICHARD
Address: 583 Q201 BEACHWALK CIRCLE
City-St-Zip: NAPLES, FL 34108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: WENDELL, MARTY
Address: 810 REEF POINT CIR
City-St-Zip: NAPLES, FL 34108

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

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

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

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

Title: DVP (X) Change () Addition
Name: LODER, CAROL
Address: 901 REEF POINT CIRCLE
City-St-Zip: NAPLES, FL 34108

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: MARTY WENDELL

PRES

04/09/2009

Electronic Signature of Signing Officer or Director

Date