

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40959

FILED
Feb 07, 2009
Secretary of State

Entity Name: BARRIER ISLANDS PRESERVATION & PROTECTION ASSOCIATION, INC. (BIPPA)

Current Principal Place of Business:

8885 HWY. A1A
MELBOURNE BEACH, FL 32951 US

New Principal Place of Business:

Current Mailing Address:

8885 HWY. A1A
MELBOURNE BEACH, FL 32951 US

New Mailing Address:

FEI Number: 59-3044836

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHANTZIS, MARK
8885 HWY. A1A
MELBOURNE BEACH, FL 32951 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: SHANTZIS, MARK
Address: 8885 HWY. A1A
City-St-Zip: MELBOURNE BEACH, FL 32951 US

Title: D () Delete
Name: HIGGS, NANCY
Address: 7860 CASURINA DR.
City-St-Zip: MELBOURNE, FL 32951

Title: D () Delete
Name: BELCHER, SUSAN
Address: 6020 RIVERSIDE DR.
City-St-Zip: MELBOURNE, FL 32951

Title: D () Delete
Name: SIMOS, SUSAN
Address: 5895 RIVERSIDE DR.
City-St-Zip: MELBOURNE, FL 32951

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:

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: MARK D. SHANTZIS

D

02/07/2009

Electronic Signature of Signing Officer or Director

Date