

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43370

FILED  
Feb 01, 2010  
Secretary of State

**Entity Name:** BEACH WALK CONDOMINIUM ASSOCIATION (LONGBOAT KEY ), INCORPORATED

**Current Principal Place of Business:**

% BETH CALLANS MANAGEMENT CORPORATION  
595 BAY ISLES ROAD, SUITE 200  
LONGBOAT KEY, FL 34228

**New Principal Place of Business:**

C/O BETH CALLANS MANAGEMENT CORPORATION  
595 BAY ISLES ROAD, SUITE 200  
LONGBOAT KEY, FL 34228

**Current Mailing Address:**

595 BAY ISLES RD. STE 201  
LONGBOAT KEY, FL 34228

**New Mailing Address:**

595 BAY ISLES RD.  
SUITE 200  
LONGBOAT KEY, FL 34228

**FEI Number:** 59-3076719

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BETH CALLANS MGMT CORP  
595 BAY ISLES RD. STE 201  
LONGBOAT KEY, FL 34228 US

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

BETH CALLANS MANAGEMENT CORPORATION  
595 BAY ISLES RD.  
SUITE 200  
LONGBOAT KEY, FL 34228 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:** BETH CALLANS MANAGEMENT CORPORATION

02/01/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** FIORE, FRANK  
**Address:** 6825 GULF OF MEXICO DR. #12  
**City-St-Zip:** LONGBOAT KEY, FL 34228

**Title:** VPS  
**Name:** OSADJAN, LOU  
**Address:** 6809 GULF OF MEXICO DRIVE #4  
**City-St-Zip:** LONGBOAT KEY, FL 34228

**Title:** T  
**Name:** STEINER, MAUREEN  
**Address:** 6815 GULF OF MEXICO DR #5  
**City-St-Zip:** LONGBOAT KEY, FL 34228

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:** FRANK FIORE

P

02/01/2010

Electronic Signature of Signing Officer or Director

Date