2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 18, 2004
Secretary of State

DOCUMENT# N45259

Entity Name: BEACHES BUSINESS ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 49161
JACKSONVILLE BEACH, FL 322409161

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 49161
JACKSONVILLE BEACH, FL 322409161

New Mailing Address:

FEI Number: 59-3157370 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LINDROFF, STEVEN G
11 NORTH 3 STREET
JACKSONVILLE BEACH, FL 32250 US

Name and Address of New Registered Agent:

LINDORFF, STEVEN G
11 NORTH 3RD STREET
JACKSONVILLE BEACH, FL 32250 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: STEVEN G. LINDORFF 08/18/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VPD ( ) Delete
Name: SHEALY, LARY
Address: 1715 PENMAN RD.
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: P ( ) Delete
Name: CAGLE, PETER
Address: 1315 S 3RD STREET
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: DT ( ) Delete
Name: LINDORFF, STEVEN G
Address: 11 NORTH 3 STREET
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: DS ( ) Delete
Name: FUNN, EMMA
Address: PO BOX 49161
City-St-Zip: JACKSONVILLE BEACH, FL 32250

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change ( ) Addition
Name: GRUENTHER, PAUL
Address: 1625 3RD AVENUE N.
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: P (X) Change ( ) Addition
Name: JACKSON, KAREN
Address: 625 A1A NORTH
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: DT (X) Change ( ) Addition
Name: LINDORFF, STEVEN G
Address: 11 NORTH 3RD STREET
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: DS (X) Change ( ) Addition
Name: WALLACE, LYNN MCCLURE
Address: 3002 OCEAN DR S
City-St-Zip: JACKSONVILLE BEACH, FL 32250

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEVEN G. LINDORFF DT 08/18/2004
Electronic Signature of Signing Officer or Director Date