

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49442

FILED
Mar 20, 2009
Secretary of State

Entity Name: BETHUNE BEACH PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

6600 S. ATLANTIC AVENUE
NEW SMYRNA BEACH, FL 32169 US

New Principal Place of Business:

6656 S. ATLANTIC AVENUE
COMMUNITY BUILDING
NEW SMYRNA BEACH, FL 32169 US

Current Mailing Address:

PO BOX 1704
NEW SMYRNA BEACH, FL 32170 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GERWE, KARL
6960 TURTLEMOUND RD
NEW SMYRNA BEACH, FL 32169 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: VD () Delete
Name: MCDONALD, ROY
Address: 6980 TURTLEMOUND RD
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: RD () Delete
Name: RIEDEL, ROASLIE
Address: 6442 ENGRAM
City-St-Zip: NEW SMYRNA BEACH, FL 321692751

Title: SD () Delete
Name: NELSON, JUDY
Address: 6990 TURTLEMOUND RD
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: TD () Delete
Name: GERWE, KARL
Address: 6960 TURTLE WOUND
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: PD () Delete
Name: GRANSTROM, BOB
Address: 6941 SOUTH ATLANTIC AVE
City-St-Zip: NEW SMYRNA BEACH, FL 32169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: BLACKETT, SYLVIA
Address: 7150 S ATLANTIC AVE
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: RD (X) Change () Addition
Name: RIEDEL, ROSALIE
Address: 6442 ENGRAM
City-St-Zip: NEW SMYRNA BEACH, FL 321692751

Title: SD (X) Change () Addition
Name: MCDONALD, ROY
Address: 6980 TURTLEMOUND RD
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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: KARL GERWE

TD

03/20/2009

Electronic Signature of Signing Officer or Director

Date