2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 08, 2008
Secretary of State

DOCUMENT# N51284

Entity Name: THE BEACH HOUSE CONDOMINIUM ASSOCIATION OF BREVARD COUNTY, INC.

Current Principal Place of Business:

8331 SOUTH AIA
MELBOURNE BEACH, FL 32951 US

New Principal Place of Business:

8333 SOUTH AIA
MELBOURNE BEACH, FL 32951 US

Current Mailing Address:

C/O THOMAS G. SCHULTZ
1441 BRICKELL AVENUE, 15TH FLOOR
MIAMI, FL 33131 US

New Mailing Address:

FEI Number: 65-0371076 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SCHULTZ, THOMAS G
C/O TEW CARDENAS
1441 BRICKELL AVENUE, 15TH FLOOR
MIAMI, FL 33131 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: SCHULTZ, THOMAS G
Address: 8333 S. AIA
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: D ( ) Delete
Name: SCHULTZ, DENISE
Address: 8333 S. AIA
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: STD ( ) Delete
Name: PEPPEL, MICHAEL
Address: 8331 S A1A
City-St-Zip: MELBOURNE BEACH, 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:

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: THOMAS G. SCHULTZ PD 07/08/2008

Electronic Signature of Signing Officer or Director — Date