

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 24, 2003 8:00 am
Secretary of State

03-24-2003 90188 021 ****61.25

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1. Entity Name
BEACH VISTA APARTMENTS, INC.



Principal Place of Business 624 ORTON AVE FT LAUDERDALE FL 33304 US	Mailing Address C/O DAVID E. BUCK, P.A. 2900 E. OAKLAND PARK BLVD. FT. LAUDERDALE FL 33306-1804
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2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **65-0471589** Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KELTZ, SELMA
624 ORTON AVE
SUITE 12
FORT LAUDERDALE FL 33304**

Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
PD	HENNESSY, RICHARD	624 ORTON AVE #2	FORT LAUDERDALE FL	<input type="checkbox"/>	<input type="checkbox"/>
VD	POTVIN, MAURICE	624 ORTON AVE #1	FORT LAUDERDALE FL	<input type="checkbox"/>	<input type="checkbox"/>
TD	KELTZ, SELMA	624 ORTON AVE #12	FORT LAUDERDALE FL	<input type="checkbox"/>	<input type="checkbox"/>
SD	WORTLEY, BARBARA	624 ORTON AVE #10	FORT LAUDERDALE FL	<input type="checkbox"/>	<input type="checkbox"/>
D	STEWART, ANTHONY	624 ORTON AVE., #20	FORT LAUDERDALE FL 33304	<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Barbara Wortley Secy.* 3/20/03 950-501-3302

CR2E037 (10/02)