

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000006351

FILED  
Mar 05, 2009  
Secretary of State

**Entity Name:** POINT OF ROCKS BEACH CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1033 POINT OF ROCKS RD.  
SARASOTA, FL 34242 US

**New Principal Place of Business:**

**Current Mailing Address:**

8253 KEENELAND CT  
MAINEVILLE, OH 45039 US

**New Mailing Address:**

**FEI Number:** 65-9546912

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEAHY, PATRICK  
1033 POINT OF ROCKS RD.  
SARASOTA, FL 34242 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: LEAHY, PATRICK  
Address: 8253 KEENELAND CT  
City-St-Zip: MAINEVILLE, OH 45039

Title: SD ( ) Delete  
Name: LEAHY, WENDY  
Address: 8253 KEENELAND CT  
City-St-Zip: MAINEVILLE, OH 45039

Title: D ( ) Delete  
Name: HARMON, PATRICIA  
Address: 8714 WUEST RD  
City-St-Zip: CINCINNATI, OH 45251

**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: PATRICK LEAHY

PD

03/05/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date