2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2011
Secretary of State

DOCUMENT# N95000003447

Entity Name: BEACON WOODS EAST - VILLIAGES 16 & 17 ASSOCIATION, INC

Current Principal Place of Business:

720 BROOKER CREEK BLVD.
SUITE 206
OLDSMAR, FL 34677

New Principal Place of Business:

Current Mailing Address:

720 BROOKER CREEK BLVD.
SUITE 206
OLDSMAR, FL 34677

New Mailing Address:

FEI Number: 59-3376215 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCANNAVINO, INC.
720 BROOKER CREEK BLVD.
SUITE 206
OLDSMAR, FL 34677 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
Name: LAWRENCE, GUS
Address: 720 BROOKER CREEK BLVD. #206
City-St-Zip: OLDSMAR, FL 34677

Title: SD
Name: GUDAVICH, DONNA
Address: 720 BROOKER CREEK BLVD. #206
City-St-Zip: OLDSMAR, FL 34677

Title: VD
Name: VANNUCCHI, LYDIA
Address: 720 BROOKER CREEK BLVD. #206
City-St-Zip: OLDSMAR, FL 34677

Title: TD
Name: NELSON, DAVID
Address: 720 BROOKER CREEK BLVD. #206
City-St-Zip: OLDSMAR, FL 34677

Title: D
Name: POPPELREITER, CHUCK
Address: 720 BROOKER CREEK BLVD. #206
City-St-Zip: OLDSMAR, FL 34677

I hereby 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 all other like empowered.

SIGNATURE: GUS LAWRENCE PD 02/16/2011

Electronic Signature of Signing Officer or Director — Date