

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005145

FILED
Jan 16, 2009
Secretary of State

Entity Name: BEACH PARK SCHOOL INCORPORATED

Current Principal Place of Business:

4200 WEST NORTH A STREET
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

4200 WEST NORTH A STREET
TAMPA, FL 33609

New Mailing Address:

FEI Number: 59-3402304

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WINKLER, RICHARD E
4200 WEST NORTH A STREET
TAMPA, FL 33609 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: WINKLER, RICHARD
Address: 15108 SPRINGVIEW ST.
City-St-Zip: TAMPA, FL 33624

Title: VD () Delete
Name: WINKLER, ANN
Address: 15108 SPRINGVIEW ST.
City-St-Zip: TAMPA, FL 33624

Title: SD () Delete
Name: PARKINSON, JAN
Address: 3304 FEERINAND AVE.
City-St-Zip: TAMPA, FL 33629

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: RICHARD WINKLER

PD

01/16/2009

Electronic Signature of Signing Officer or Director

Date