

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002580

FILED  
Jan 27, 2009  
Secretary of State

Entity Name: CONRAD BEACH HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

FIREHOUSE W.  
LONGBOAT KEY, FL 34228

**New Principal Place of Business:**

**Current Mailing Address:**

5500 MARINA DR  
STE 1  
HOLMES BEACH, FL 34217

**New Mailing Address:**

5500 MARINA DR  
STE 1  
HOLMES BEACH, FL 34217 US

FEI Number: 65-0922079

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HEROLD, WILLIAM M JR  
5500 MARINA DR  
STE 1  
HOLMES BEACH, FL 34217 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: DT ( ) Delete  
Name: KOST, VINCENT  
Address: 366 FIREHOUSE LN  
City-St-Zip: LONGBOAT KEY, FL 34228

Title: VP ( ) Delete  
Name: WHELAN, DANIEL  
Address: P.O. BOX 451  
City-St-Zip: CAPE MAY POINT, NJ 08212

Title: DP ( ) Delete  
Name: PROVENZANO, ALBERT  
Address: P.O. BOX 820325  
City-St-Zip: SIOUX FALLS, SD 57186

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DS (X) Change ( ) Addition  
Name: BRABANT, JERRY  
Address: 383 FIREHOUSE LANE #20  
City-St-Zip: LONGBOAT KEY, FL 34228 US

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: DANIEL WHELAN

VP

01/27/2009

Electronic Signature of Signing Officer or Director

Date