

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009028

FILED  
Jan 05, 2007  
Secretary of State

**Entity Name:** THE BEACON ON 3RD STREET CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5901 SUN BLVD SUITE 203  
ST PETERSBURG, FL 33715

**New Principal Place of Business:**

**Current Mailing Address:**

5901 SUN BLVD SUITE 203  
ST PETERSBURG, FL 33715

**New Mailing Address:**

**FEI Number:** 20-0433526

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NEWTON, WILLIAM  
5901 SUN BLVD SUITE 203  
SUITE 5000  
ST PETERSBURG, FL 33715 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: HALL, WALTER  
Address: 5901 SUN BLVD SUITE 203  
City-St-Zip: ST. PETERSBURG, FL 33715

Title: SD ( ) Delete  
Name: ANNICCHIARO, JOHN  
Address: 5901 SUN BLVD SUITE 203  
City-St-Zip: ST. PETERSBURG, FL 33715

Title: VPD ( ) Delete  
Name: HASKELL, ROBERT  
Address: 5901 SUN BLVD SUITE 203  
City-St-Zip: ST PETERSBURG, FL 33715

Title: D ( ) Delete  
Name: REARICK, PHILIP  
Address: 5901 SUN BLVD SUITE 203  
City-St-Zip: ST. PETERSBURG, FL 33715

Title: D (X) Delete  
Name: SMITH, RICHARD  
Address: 5901 SUN BLVD SUITE 203  
City-St-Zip: ST. PETERSBURG, FL 33715

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: MACDONALD, BOB  
Address: 5901 SUN BLVD SUITE 203  
City-St-Zip: ST. PETERSBURG, FL 33715

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 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: WALTER HALL

D

01/05/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date