## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004608

**Entity Name: THE TERRACES AT BEACHSIDE CONDOMINIUM** 

ASSOCIATION, INC.

**Current Principal Place of Business:** 

32 S. FLETCHER AVE AMELIA ISLAND, FL 32034

**Current Mailing Address:** 

P.O. BOX 6024

AMELIA ISLAND, FL 32035 US

FEI Number: 73-1692428 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUSH ROSS REGISTERED AGENT SERVICES, LLC 1801 N. HIGHLAND AVENUE TAMPA, FL 33602 US

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

**FILED** Apr 10, 2017

**Secretary of State** 

CC3528751941

Officer/Director Detail:

Title PD Title **VPD** 

Name FORD, JEFFREY Name SIMONETTI, SHERRI Address 1708 SOUTHLAKE DR. Address 2104 W. MAJORY AVE TAMPA FL 33606 City-State-Zip: LOUISVILLE KY 40223 City-State-Zip:

Title Title TD

GERSTNER, KATHY Name NASH, STEVE Name

Address 9302 ELSIE CT. Address 1500 W CHANDLER BLVD City-State-Zip: CHANDLER AZ 85224-6142

Title DIRECTOR

City-State-Zip:

LANGFORD, MICHAEL Name

968 N ORMEWOOD PARK DRIVE SE Address

FLOYDS KNOBS IN 47119

ATLANTA GA 30316 City-State-Zip:

SIGNATURE: JEFFREY FORD

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.

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

04/10/2017