## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000001186

Entity Name: THE BEACON NETWORK, INC.

**Current Principal Place of Business:** 

900 WINDERLY PLACE SUITE 300

MAITLAND, FL 32751

**Current Mailing Address:** 

900 WINDERLEY PLACE SUITE 1300 MAITLAND, FL 32751 US

FEI Number: 27-4894580 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHIN, TAE SHIN LAW FIRM, P.A. 200 SOUTH ORANGE AVENUE, SUITE 1450 ORLANDO, FL 32801 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** Aug 27, 2015

**Secretary of State** 

CC5169784429

Officer/Director Detail:

Title D, CHAIRMAN Title VC, DIRECTOR GALLART, ROGUE Name REALIN. AURORA Name

Address 900 WINDERLEY PLACE SUITE 1300 Address 3201 E. COLONIAL DRIVE

SUITE A-20

City-State-Zip: MAITLAND FL 32751 City-State-Zip: ORLANDO FL 32803

Title SECRETARY, DIRECTOR **DIRECTOR** Title

Name LUCE-HITT, RACHEL Name ROMANY, MARISOL

Address 1768 PARK CENTER DRIVE 1414 KUHL AVE MP#56 Address

ORLANDO FL 32835 City-State-Zip: ORLANDO FL 32806 City-State-Zip:

Title DIRECTOR Title DIRECTOR

Name TRIBBLE, WILHELMINA Name EASTERLING, WAYNE

Address 8117 CANYON LAKE CIRCLE 25617 HAWKS RUN LANE Address

City-State-Zip: ORLANDO FL 32835 SUITE 100

SORRENTO FL 32776 City-State-Zip:

Title **DIRECTOR** Title **DIRECTOR** 

Name LEE. BRIDGET

Name MONTGOMERY, JASON Address 100 W. ANDERSON ST.

1000 HOLT AVE. City-State-Zip: ORLANDO FL 32801

City-State-Zip: WINTER PARK FL 32789

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Address

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.

08/27/2015 SIGNATURE: AURORA REALIN **CHAIRPERSON** 

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

TitleDIRECTORTitleDIRECTORNamePRESTON, LOUISNameJAMES, PAUL

Address 900 WINDERLEY PLACE SUITE 1300 Address 301 EAST PINE STREET #150

City-State-Zip: MAITLAND FL 32751 City-State-Zip: ORLANDO FL 32801