

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000006241

**Entity Name:** BEACH HOUSE CONDOMINIUM ASSOCIATION OF KEY WEST, INC.

**FILED**  
**Feb 20, 2024**  
**Secretary of State**  
**3321601172CC**

**Current Principal Place of Business:**

5051 OVERSEAS HWY  
KEY WEST, FL 33040

**Current Mailing Address:**

7812 PALM PARKWAY  
ORLANDO, FL 32836 US

**FEI Number: 65-0796186**

**Certificate of Status Desired: Yes**

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

CORPORATION SERVICE COMPANY  
1201 HAYS ST  
TALLAHASSEE, FL 32301 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

**Officer/Director Detail :**

Title SECRETARY-TREASURER  
Name BOON, WILLIAM  
Address 7812 PALM PARKWAY  
City-State-Zip: ORLANDO FL 32836

Title VP  
Name AST, DORIS  
Address 750 KINGS DRIVE  
City-State-Zip: WILLMAR MN 56201

Title PRESIDENT  
Name GREVIOR, ANDREA  
Address 108 WEST SHORE DRIVE  
City-State-Zip: ANDOVER NH 03216

Title DIRECTOR  
Name CONNORS, EUGENE  
Address 7812 PALM PARKWAY  
City-State-Zip: ORLANDO FL 32836

Title DIRECTOR  
Name GREENAWAY, MIKE  
Address 7812 PALM PARKWAY  
City-State-Zip: ORLANDO FL 32836

*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.*

**SIGNATURE: WILLIAM BOON**

**SECRETARY**

**02/20/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date