

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 720403

**Entity Name:** 500 BEACH ROAD CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1 TURTLE BEACH ROAD  
VERO BEACH, FL 32963

**Current Mailing Address:**

1 TURTLE BEACH ROAD  
VERO BEACH, FL 32963

**FEI Number:** 59-1444208

**Certificate of Status Desired:** No

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

COMMUNITY CONDOMINIUM SERVICES INC.  
1 TURTLE BEACH ROAD  
VERO BEACH, FL 32963 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           DIRECTOR  
Name           LYONS, MARGARET  
Address        500 BEACH ROAD, APT 102  
City-State-Zip: VERO BEACH FL 32963

Title           VP  
Name           LADY, KARL W  
Address        500 BEACH ROAD, APT 205  
City-State-Zip: VERO BEACH FL 32963

Title           TREASURER  
Name           FLYNN, MICHAEL H  
Address        500 BEACH ROAD, APT 310  
City-State-Zip: VERO BEACH FL 32963

Title           PRESIDENT  
Name           SIMPSON, H. CLAY JR.  
Address        500 BEACH ROAD, APT 214  
City-State-Zip: VERO BEACH FL 32963

Title           ASSISTANT SECRETARY  
Name           GENOVESE, JEANETTE  
Address        1 TURTLE BEACH ROAD  
City-State-Zip: VERO BEACH FL 32963

Title           SECRETARY  
Name           RAPP, J. STEPHAN  
Address        500 BEACH ROAD, APT 116  
City-State-Zip: VERO BEACH FL 32963

*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:** JEANETTE GENOVESE

**ASSISTANT SECRETARY    03/17/2016**

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

\_\_\_\_\_  
Date