

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759711

FILED  
Mar 28, 2009  
Secretary of State

Entity Name: B.T.T. CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

6610 NORTH UNIVERSITY DRIVE  
SUITE 250  
TAMARAC, FL 33321

**New Principal Place of Business:**

**Current Mailing Address:**

6610 NORTH UNIVERSITY DRIVE  
SUITE 250  
TAMARAC, FL 33321

**New Mailing Address:**

FEI Number: 65-0220884      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SABATER, ALBERTO  
6610 N. UNIVERSITY DR.  
#210  
TAMARAC, FL 33321 US

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

BERTUCELLI, DANIEL L  
6610 N. UNIVERSITY DR.  
#250  
TAMARAC, FL 33321 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: DANIEL L BERTUCELLI      03/28/2009  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SABATER, ALBERTO  
Address: 6610 N UNIVERSITY DR #210  
City-St-Zip: TAMARAC, FL 33321

Title: P ( ) Delete  
Name: RODRIGUEZ, JORDI  
Address: 6610 N UNIVERSITY DR, #100  
City-St-Zip: TAMARAC, FL 33321

Title: TS ( ) Delete  
Name: BERTUCELLI, DANIEL  
Address: 6610 N UNIVERSITY DR. #240  
City-St-Zip: TAMARAC, FL 33321

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

Title: TD (X) Change ( ) Addition  
Name: BRUCK, CLAUDETTE  
Address: 6610 N UNIVERSITY DRIVE, #200  
City-St-Zip: TAMARAC, FL 33321 US

Title: VPSD (X) Change ( ) Addition  
Name: RODRIGUEZ, JORDI  
Address: 6610 N UNIVERSITY DR, #100  
City-St-Zip: TAMARAC, FL 33321 US

Title: PD (X) Change ( ) Addition  
Name: BERTUCELLI, DANIEL  
Address: 6610 N UNIVERSITY DR. #250  
City-St-Zip: TAMARAC, FL 33321 US

I hereby certify that the information supplied with this filing does not qualify 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: DANIEL L BERTUCELLI      PD      03/28/2009  
Electronic Signature of Signing Officer or Director      Date