

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005146

FILED  
Mar 15, 2012  
Secretary of State

**Entity Name:** BELLA VERDE CONDOMINIUM ASSOCIATION , INC.

**Current Principal Place of Business:**

4723 W ATLANTIC AVE A-19  
DELRAY BEACH, FL 33445

**New Principal Place of Business:**

**Current Mailing Address:**

% WILSON LANDSCAPING & MANAGEMENT  
4723 W. ATLANTIC AVE., STE A-19  
DELRAY BEACH, FL 33445

**New Mailing Address:**

**FEI Number:** 33-1044310      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

ROBERT BURR, ST. JOHN, CORE AND LEMME, PA  
1601 FORUM PL., SUITE 701  
WEST PALM BEACH, FL 33401      US

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

PATTI HEIDLER LADWIG, ESQ  
12765 W FOREST HILL BLVD  
SUITE 1312  
WELLINGTON, FL 33414 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: PATTI HEIDLER LADWIG

03/15/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ADLER, SCOTT B  
Address: 6436 BELLA CIR #1106  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: V  
Name: FLEISHER, MARLA  
Address: 6351 BELLA CIR #801  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: S  
Name: DEAL, ROBERT  
Address: 6450 BELLA CIR. #1204  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: T  
Name: SHOIB, GERALD  
Address: 6351 BELLA CIR #805  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D  
Name: HERSHMAN, STUART  
Address: 6449 BELLA CIR. #101  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D  
Name: SPECKMAIER, SABINE  
Address: 6379 BELLA CIR #603  
City-St-Zip: BOYNTON BEACH, FL 33437

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: SCOTT B ADLER

P

03/15/2012

Electronic Signature of Signing Officer or Director

Date