

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 28, 2008  
Secretary of State**

DOCUMENT# N03000006808

Entity Name: BENTLEY BEACH CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

101 OCEAN DRIVE  
MIAMIBEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

101 OCEAN DRIVE  
MIAMIBEACH, FL 33139

**New Mailing Address:**

FEI Number: 20-0157699      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

EISINGER, BROWN LEWIS & FRANKEL, P.A.  
PRESIDENTIAL CIRCLE, 4000 HOLLYWOOD BLVD.  
SUITE 265 SOUTH  
HOLLYWOOD, FL, FL 33021 US

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

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

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: FALSETTO, GINO  
Address: 101 OCEAN DRIVE  
City-St-Zip: MIAMI BEACH, FL 33139

Title: VP ( ) Delete  
Name: TUFFIN, BRIAN  
Address: 101 OCEAN DRIVE  
City-St-Zip: MIAMI BEACH, FL 33139

Title: ST ( ) Delete  
Name: ARCHAMBAULT, DENNIS  
Address: 101 OCEAN DRIVE  
City-St-Zip: MIAMI BEACH, FL 33139

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: GINO FALSETTO

P

02/28/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date