

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 24, 2004 8:00 am
Secretary of State

02-24-2004 90024 041 ****70.00

DOCUMENT # N08889

1. Entity Name

BELLA VISTA TERRACE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**160 ISLE OF VENICE
FT LAUDERDALE FL 33301-1459**

Mailing Address

**160 ISLE OF VENICE
FT LAUDERDALE FL 33301
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

59-6058535

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BELLA VISTA TERR. CONDO. # 8
160 ISLE OF VENICE
FORT LAUDERDALE FL 33301**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Ellen Venios, Treasurer

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

Feb 15, 2004

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	D	SHALITTA, SALLY	<input type="checkbox"/> Delete
NAME		160 ISLE OF VENICE	
STREET ADDRESS		FT LAUDERDALE FL 33301	
CITY-ST-ZIP			
TITLE	SECRETARY	HARDAWAY, THOMAS	<input type="checkbox"/> Delete
NAME		160 ISLE OF VENICE #8	
STREET ADDRESS		FT LAUDERDALE FL	
CITY-ST-ZIP			
TITLE	D	LAWRENCE, TEIG	<input checked="" type="checkbox"/> Delete
NAME		160 ISLE OF VENICE #6	
STREET ADDRESS		FORT LAUDERDALE FL 33301	
CITY-ST-ZIP			
TITLE	V	SERR, GUDRUN	<input checked="" type="checkbox"/> Delete
NAME		160 ISLE OF VENICE	
STREET ADDRESS		FORT LAUDERDALE FL 33301	
CITY-ST-ZIP			
TITLE	T	VENIOS, ELLEN	<input type="checkbox"/> Delete
NAME		160 ISLE OF VENICE #11	
STREET ADDRESS		FT LAUDERDALE FL 33301	
CITY-ST-ZIP			
TITLE			<input type="checkbox"/> Delete
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	NANCY LANGSDALE, V.P.-ASST	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	160 ISLE OF VENICE APT 47	
STREET ADDRESS	FT. LAUDERDALE, FL 33301	
CITY-ST-ZIP		
TITLE	PRESIDENT	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILJENKO MARINKOVIC	
STREET ADDRESS	160 ISLE OF VENICE # 24	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33301	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ellen Venios, Treasurer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 15, 2004 954-467-3639
Date Daytime Phone #