2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jun 05, 2006 8:00 am Secretary of State

06-05-2006 90148 017 ****61.25

DOCUMENT # N16846	200
1. Entity Name BELFORT CONDOMINIUM F ASSOCIATION, INC.	

Principal Place of Business Mailing Address 50020684 C/O CASTLE GROUP C/O CASTLE GROUP 12270 SW 3RD STREET PO BOX 559009 FORT LAUDERDALE, FL 33325 FORT LAUDERDALE, FL 33355 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04152006 Chg-NP CR2E037 (11/05) Applied For City & State City & State 4. FEI Number 59-2698652 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7.-Name and Address of New Registered Agent -----THE LAW OFFICES OF KATZMAN & KORR, P.A. 1501 NORTH WEST 49TH ST., STE 202 Street Address (P.O. Box Number is Not Acceptable) FORT LAUDERDALE, FL 33309 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE Make check payable to ... 9. Election Campaign Financing Filing Fee Is \$61.25 \$5.00 May Be Trust Fund Contribution Florida Department of State Due by May 1, 2006 Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 VD TITLE TITLE ☐ Addition □**y**Delete Change KAHN, GILBERT NAME NAME SINGMAN, ARNOLD STREET ADORESS 9737 NO. BELFORT CIR. STREET ADDRESS 9739 N BELFORT CR CITY-SY-ZIP TAMARAC, FL 33321 CITY-ST-ZIP TAMARAC, FL 33321 TITLE ☐ Delete TITLE ☐ Change ☐ Addition KALMAN, LESTER NAME NAME STREET ADDRESS 9779 N BELFORT CR STREET ADDRESS CITY-ST-ZIP TAMARAC, FL CITY-ST-ZIP TITLE Delete TITLE Change ■ Addition KAHN BERNICE ---NAME STREET ADDRESS 9737 NORTH BELFORT CIRCLE STREET ADDRESS CITY-ST-ZIP TAMARAC, FL CITY-ST-ZIP TITLE ☐ Detete TITLE TD Change ■ Addition RUTRICK, HARRY NAME NAME 9735 N. BELFORT CIRCLE STREET ADDRESS STREET ADDRESS TAMARAC, FL 33321 CITY-ST-ZIF CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition SALTZMAN, SHIRLEY NAME NAME STREET ADDRESS 9753 N. BELFORT CIR. STREET ADDRESS CITY-ST-ZIP TAMARAC, FL 33321 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY+ST-7IP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICEROR DIRECTOR Sing man Grnold