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Mar 31 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 736429 (2)
 1. Corporation Name
BELLA MAR CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 367 SOUTH FEDERAL HIGHWAY DEERFIELD BEACH FL 33441	Mailing Address 367 SOUTH FEDERAL HIGHWAY DEERFIELD BEACH FL 33441
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3. Date Incorporated or Qualified 07/19/1976
4. FEI Number 59-1801076
Applied For <input type="checkbox"/> Not Applicable

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent WISE, PAUL D. 367 SOUTH FEDERAL HWY SUITE C-318 DEERFIELD BEACH FL 33441	
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10. Name and Address of New Registered Agent	
81 Name Brinkworth, James	
82 Street Address (P.O. Box Number Is Not Acceptable) 367 South Federal Hwy	
83 City Ap	
84 City Deerfield Beach	85 Zip Code FL 33441

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *James Brinkworth, Pres.* DATE _____
Signature, in ink, of Principal, name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE PD	<input checked="" type="checkbox"/> DELETE
NAME WISE, PAUL D	
STREET ADDRESS 367 S. FED. HWY. #114	
CITY-ST-ZIP DEERFIELD BCH FL	
TITLE VD	<input checked="" type="checkbox"/> DELETE
NAME WISE, JUDITH	
STREET ADDRESS 367 S. FED. HWY. #208	
CITY-ST-ZIP DEERFIELD BCH FL	
TITLE TD	<input checked="" type="checkbox"/> DELETE
NAME BIRON, MARION	
STREET ADDRESS 367 S. FEDERAL HWY, #102	
CITY-ST-ZIP DEERFIELD BCH FL	
TITLE SD	<input checked="" type="checkbox"/> DELETE
NAME GIORGETTI, LOIS	
STREET ADDRESS 367 S. FED. HWY. #219	
CITY-ST-ZIP DEERFIELD BCH FL	
TITLE D	<input checked="" type="checkbox"/> DELETE
NAME DEWEY, ROBERT	
STREET ADDRESS 367 S FEDERAL HWY	
CITY-ST-ZIP DEERFIELD BCH FL	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME Brinkworth, James	
1.3 STREET ADDRESS 367 S. Federal Hwy	
1.4 CITY-ST-ZIP Deerfield Beach, Fl. 33441	
2.1 TITLE VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME O'Leary, James	
2.3 STREET ADDRESS 367 S. Federal Hwy.	
2.4 CITY-ST-ZIP Deerfield Beach, Fl. 33441	
3.1 TITLE VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME Meneo, May	
3.3 STREET ADDRESS 367 S. Federal Hwy.	
3.4 CITY-ST-ZIP Deerfield Beach, Fl. 33441	
4.1 TITLE STD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME LaVerme, Mary Ann	
4.3 STREET ADDRESS 367 S. Federal Hwy.	
4.4 CITY-ST-ZIP Deerfield Beach, Fl. 33441	
5.1 TITLE SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME Battles, Ann	
5.3 STREET ADDRESS 367 S. Federal Hwy.	
5.4 CITY-ST-ZIP Deerfield Beach, Fl. 33441	
6.1 TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME Biron, Marian	
6.3 STREET ADDRESS 367 S. Federal Hwy.	
6.4 CITY-ST-ZIP Deerfield Beach, Fl. 33441	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *James Brinkworth, Pres.*

CR2E037 (10/97)

D
Bishop, William
367 S. Federal Hwy.
Deerfield Beach, Fl. 33441

D
Herzberg, Kurt
367 S. Federal Hwy.
Deerfield Beach, Florida 33441

D
Van Orsdel, James
367 S. Federal Hwy.
Deerfield Beach, Fl. 33441