

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08889

FILED  
Apr 21, 2008  
Secretary of State

**Entity Name:** BELLA VISTA TERRACE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

160 ISLE OF VENICE  
FT LAUDERDALE, FL 333011459

**New Principal Place of Business:**

**Current Mailing Address:**

160 ISLE OF VENICE  
FT LAUDERDALE, FL 33301 US

**New Mailing Address:**

**FEI Number:** 59-6058535      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BELLA VISTA TERR. CONDO. # 8  
160 ISLE OF VENICE  
FORT LAUDERDALE, FL 33301 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: S ( ) Delete  
Name: HARDAWAY, THOMAS  
Address: 160 ISLE OF VENICE #8  
City-St-Zip: FT LAUDERDALE, FL

Title: D ( ) Delete  
Name: VALENCIA, JOHN  
Address: 160 ISLE OF VENICE #28  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VP ( ) Delete  
Name: YAN, YUE  
Address: 160 ISLE OF VENICE, # 5  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: P ( ) Delete  
Name: MARINKOVIC, MILJENKO  
Address: 160 ISLE OF VENICE #24  
City-St-Zip: FT LAUDERDALE, FL 33301

Title: T ( ) Delete  
Name: ARNETT, VINCE  
Address: 160 ISLE OF VENICE #21  
City-St-Zip: FORT LAUDERDALE, FL 33301

**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:

Title: T (X) Change ( ) Addition  
Name: ARNETTE, VINCE  
Address: 2455 E. SUNRISE BLVD. STE 1201  
City-St-Zip: FORT LAUDERDALE, FL 33304

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: VINCENT ARNETTE

TRE

04/21/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date