# I hereby 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 all other like empowered.

#### SIGNATURE: LEOPOLDO COLON

Electronic Signature of Signing Officer/Director Detail

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: BELMAR CONDOMINIUM ASSOCIATION, INC.

#### 419 NE 19 STREET 401 MIAMI, FL 33132

**DOCUMENT# 723674** 

### **Current Mailing Address:**

6721 SW 159 PLACE MIAMI, FL 33193 US

# FEI Number: 68-0578724

Name and Address of Current Registered Agent:

COLON, LEOPOLDO 419 NE 19 ST 401 MIAMI, FL 33132 US Certificate of Status Desired: Yes

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

## Officer/Director Detail :

| Title           | P                          | Title           | VP                         |
|-----------------|----------------------------|-----------------|----------------------------|
| Name            | MERKER, KENNETH E          | Name            | COLON, LEOPOLDO            |
| Address         | 4424 NE 1 ST AVE           | Address         | 419 NE 19 STREET APT 401   |
| City-State-Zip: | MIAMI FL 33137             | City-State-Zip: | MIAMI FL 33132             |
| Title           | т                          | Title           | S                          |
| Name            | HERRERO, LOURDES           | Name            | BEHR, MARY                 |
| Address         | 419 NE 19 STREET APT 403   | Address         | 419 NE 19TH STREET APT 502 |
| City-State-Zip: | MIAMI FL 33132             | City-State-Zip: | MIAMI FL 33132             |
| Title           | D                          | Title           | D                          |
| Name            | HERRERO, EDUARDO           | Name            | WAGNER, THOMAS             |
| Address         | 419 NE 19TH STREET APT 403 | Address         | 419 NE 19 ST APT 502       |
| City-State-Zip: | MIAMI FL 33132             | City-State-Zip: | MIAMI FL 33132             |
|                 |                            |                 |                            |

at my alactropic signature shall have the same local offset as

VICE PRESIDENT

01/14/2015

Date