# 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0800000511

Entity Name: BELLE ISLE RESIDENTS ASSOCIATION, INC.

### Current Principal Place of Business:

11 ISLAND AVENUE C/O GARRY KORR APT 901 MIAMI BEACH, FL 33139

### **Current Mailing Address:**

11 ISLAND AVENUE C/O GARRY KORR APT 901 MIAMI BEACH, FL 33139 US

### FEI Number: 90-0346434

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

KORR, GARRY 11 ISLAND AVENUE C/O GARRY KORR APT 901 MIAMI BEACH, FL 33139 US

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	GARRY KORR		03/04/201	7
	Electronic Signature of Registered Agent		Date	_
Officer/Director Detail :				
Title	Р	Title	VP	
Name	DIFFENDERFER, SCOTT	Name	WEINSTEIN, LONNE	
Address	20 ISLAND AVENUE #402	Address	9 ISLAND AVENUE	
City-State-Zip:	MIAMI BEACH FL 33139		C/O LONNIE WEINSTEIN APT 1614	
		City-State-Zip:	MIAMI BEACH FL 33139	
Title	S	Title Name	т	
Name	TRACY, MONICA H		KORR, GARRY	
Address	5ISLAND AVE. #16J			
	MIAMI BEACH FL 33139	Address	11 ISLAND AVENUE	
			APT 901	
		City-State-Zip:	MIAMI BEACH FL 33139	

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: GARRY KORR

TREASURER

03/04/2017

Electronic Signature of Signing Officer/Director Detail

## FILED Mar 04, 2017 Secretary of State CC5311306812

Certificate of Status Desired: No

Date