2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17110

Entity Name: BELFORT CONDOMINIUM I ASSOCIATION, INC.

FILED Mar 28, 2017 **Secretary of State** CC4108891186

Current Principal Place of Business:

C/O PHOENIX MANAGEMENT SERVICES 4800 N. STATE RD. 7 #105 LAUDERDALE LAKES, FL 33321

Current Mailing Address:

C/O PHOENIX MANAGEMENT SERVICES 4800 N. STATE RD.7 #105 LAUDERDALE LAKES, FL 33321 US

FEI Number: 65-0035931 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRYDMAN, RACHEL 3111 N. UNIVERSITY DRIVE CORAL SPRINGS, FL 33065 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: RACHEL FRYDMAN 03/28/2017

> Date Electronic Signature of Registered Agent

> > #105

Officer/Director Detail:

Title SECRETARY Title

Name COPLIN, CAROLE Name LIGUS, BARBARA 4800 N. STATE RD.7 Address 4800 N. STATE RD.7 Address

#105

City-State-Zip: LAUDERDALE LAKES FL 33321 City-State-Zip: LAUDERDALE LAKES FL 33321

Title **TREASURER** Title **PRESIDENT**

Name DAWSON, MARILYN Name HAMMOND, SANDRA

Address 4800 N. STATE RD.7 Address 4800 N. STATE RD.7 #105 #105

City-State-Zip: LAUDERDALE LAKES FL 33321 City-State-Zip: LAUDERDALE LAKES FL 33321

Title DIRECTOR

EVANS, ELIZABETH Name 4800 N. STATE RD.7 Address

#105

City-State-Zip: LAUDERDALE LAKES FL 33321

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.

03/28/2017 SIGNATURE: SANDRA HAMMOND **PRESIDENT**