

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18199

**FILED
Mar 04, 2019
Secretary of State
2309352069CC**

Entity Name: BELFORT CONDOMINIUM Q ASSOCIATION, INC.

Current Principal Place of Business:

C/O PHOENIX MANAGEMENT SERVICES
7680 N. NOB HILL RD.
TAMARAC, FL 33321

Current Mailing Address:

C/O PHOENIX MANAGEMENT SERVICES
7680 N. NOB HILL RD.
TAMARAC, FL 33321 US

FEI Number: 59-2722350

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRYDMAN, RACHEL ESQ.
3111 N. UNIVERSITY DRIVE
SUITE 403
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, ESQUIRE

03/04/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name IZENSON, LINDA
Address C/O PHOENIX MANAGEMENT
 SERVICES
 7680 N. NOB HILL RD.
City-State-Zip: TAMARAC FL 33321

Title TREASURER
Name HOCHBERG, ALAN
Address C/O PHOENIX MANAGEMENT
 SERVICES
 7680 N. NOB HILL RD.
City-State-Zip: TAMARAC FL 33321

Title SECRETARY
Name DEGESERO, MARYLYNN
Address C/O PHOENIX MANAGEMENT
 SERVICES
 7680 N. NOB HILL RD.
City-State-Zip: TAMARAC FL 33321

Title VP
Name SCHISSEL, CLIFFORD
Address C/O PHOENIX MANAGEMENT
 SERVICES
 7680 N. NOB HILL RD.
City-State-Zip: TAMARAC 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.

SIGNATURE: LINDA IZENSON

PRESIDENT

03/04/2019

Electronic Signature of Signing Officer/Director Detail

Date