

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714544

FILED  
Feb 16, 2010  
Secretary of State

Entity Name: PORT BELLEAIR NO. 1, INC.

**Current Principal Place of Business:**

C/O QUALIFIED PROP. MGMT., INC.  
5901 US 19 N., SUITE 7Q  
NEW PORT RICHEY, FL 33770 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O QUALIFIED PROP. MGMT., INC.  
1301 SEMINOLE BLVD., #110  
LARGO, FL 33770 US

**New Mailing Address:**

FEI Number: 59-2418331

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

QUALIFIED PROPERTY MANAGEMENT, INC.  
5901 US 19 N.  
SUITE 7Q  
NEW PORT RICHEY, FL 34652 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: SD  
Name: TOUPONSE, ANGELA  
Address: 155 BLUFF VIEW DR., #206  
City-St-Zip: BELLEAIR BLUFFS, FL 33770

Title: PD  
Name: RODRIGUEZ, SANDALIO  
Address: 155 BLUFFVIEW DR #204  
City-St-Zip: BELLEAIR BLUFFS, FL 33770

Title: VD  
Name: FALLUCCHI, FRANK  
Address: 155 BLUFF VIEW DR, # 205  
City-St-Zip: BELLEAIR BLUFFS, FL 33770

Title: TD  
Name: HALIWELL, DOREEN  
Address: 155 BLUFFVIEW DR # 102  
City-St-Zip: LARGO, FL 33770

Title: D  
Name: FEDORSYN, RUTH  
Address: 155 BLUFF VIEW DR., 209  
City-St-Zip: BELLEAIR BLUFFS, FL 33770

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: SANDALIO RODRIGUEZ

PD

02/16/2010

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

\_\_\_\_\_  
Date