

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718802

FILED
Apr 18, 2009
Secretary of State

Entity Name: PORT BELLEAIR NO.3, INC., A CONDOMINIUM

Current Principal Place of Business:

1799-B NORTH BELCHER ROAD
CLEARWATER, FL 33765 US

New Principal Place of Business:

24701 US HIGHWAY 19 N SUITE 102
CLEARWATER, FL 33763 US

Current Mailing Address:

P.O. BOX 14357
CLEARWATER, FL 33766 US

New Mailing Address:

FEI Number: 59-1981427 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

AMERI-TECH REALTY INC
1799-B NORTH BELCHER ROAD
CLEARWATER, FL 33765 US

Name and Address of New Registered Agent:

AMERI-TECH REALTY INC
24701 US HIGHWAY 19 N SUITE 102
CLEARWATER, FL 33763 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: MICHAEL G PEREZ, PRESIDENT

04/18/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GORMAN, WILLIAM
Address: 139 BLUFF VIEW DRIVE #409
City-St-Zip: BELLEAIR BLUFFS, FL 33770

Title: TD () Delete
Name: ANDERSON, LARRY
Address: 139 BLUFFVIEW DR #405
City-St-Zip: BELLEAIR BLUFFS, FL 33770

Title: D () Delete
Name: MOLOHAN, JAMES
Address: 139 BLUFF VIEW DRIVE #108
City-St-Zip: LARGO, FL 33770

Title: SD () Delete
Name: GAYHART, BARBARA
Address: 139 BLUFF VIEW DRIVE #407
City-St-Zip: LARGO, FL 33770

Title: VPD () Delete
Name: BOICH, DON
Address: 139 BLUFF VIEW DRIVE #406
City-St-Zip: BELLEAIR BLUFFS, FL 33709

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: STARTTON, LEE
Address: 1200 HARBOR HILLS DR
City-St-Zip: LARGO, FL 33770

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: WADDEN, KATHLEEN
Address: 139 BLUFF VIEW DRIVE #210
City-St-Zip: LARGO, FL 33770

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LEE STRATTON

PD

04/18/2009

Electronic Signature of Signing Officer or Director

Date