

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721490

FILED
Feb 16, 2010
Secretary of State

Entity Name: PORT BELLEAIR NO. 4, INC. A CONDONINIUM

Current Principal Place of Business:

C/O QUALIFIED PROP MGMT INC
1301 SEMINOLE BLVD # 110
LARGO, 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: 59-1972480

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

QUALIFIED PROPERTY MGMT 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: PD
Name: STOCK, GEORGE
Address: 131 BLUFF VIEW DR., #403
City-St-Zip: BELLEAIR BLUFFS, FL 33770

Title: D
Name: FAIRBANKS, LYLE R
Address: 131 BLUFF VIEW DR #101
City-St-Zip: BELLEAIR BLUFFS, FL 33770

Title: VD
Name: TIETJEN, MATTHEW
Address: 131 BLUFF VIEW DR # 206
City-St-Zip: BELLEAIR BLUFFS, FL 33770

Title: TD
Name: MCCUTCHEON, JIM
Address: 131 BLUFF VIEW DR., #312
City-St-Zip: BELLAIR BLUFFS, FL 33770

Title: SD
Name: GANDY, THERESA
Address: 131 BLUFF VIEW DRIVE #211
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: GEORGE STOCK

PD

02/16/2010

Electronic Signature of Signing Officer or Director

Date