

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 06, 2006 8:00 am
Secretary of State

02-06-2006 90058 025 ****61.25

DOCUMENT # 725081 1. Entity Name BARCELONA CONDOMINIUM NORTH, INC.					
Principal Place of Business 251 S. CYPRESS RD CLUBHOUSE OFFICE POMPANO BEACH FL 33060			Mailing Address 10034 W. MCNAB RD. TAMARAC FL 33321		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1482324 ☐ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
MILES, JAMES R 10034 W. MCNAB RD. TAMARAC FL 33321			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW: FEE IS \$61.25 Due By May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERNARDO, STEVEN 10034 W MCNAB ROAD TAMARAC FL 33321 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	ARTHUR GORDON ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ROGERS, JANET G 10034 W MCNAB ROAD TAMARAC FL 33321 ☐ Delete V.P		TITLE NAME STREET ADDRESS CITY-ST-ZIP	LEO BOLAND ☐ Change ☒ Addition DIR	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BEAULIEU, ROLAND 10034 W MCNAB ROAD TAMARAC FL 33321 ☐ Delete DIR		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COLLINS, ERIC 10034 W MCNAB ROAD TAMARAC FL 33321 ☐ Delete PRES		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD VIVIRTO, PAT 10034 W MCNAB ROAD TAMARAC FL 33321 ☐ Delete TREAS		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD NONEMAKER, LINDA 10034 W MCNAB ROAD TAMARAC FL 33321 ☐ Delete DIR		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with or without other like empowered.

SIGNATURE: *[Signature]* **2/3/06 954 781 2650**