

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725081

FILED
Feb 08, 2011
Secretary of State

Entity Name: BARCELONA CONDOMINIUM NORTH, INC.

Current Principal Place of Business:

C/O CONSOLIDATED COMMUNITY MGMT
7124 NORTH NOB HILL ROAD
TAMARAC, FL 33321

New Principal Place of Business:

Current Mailing Address:

C/O CONSOLIDATED COMMUNITY MGMT
7124 NORTH NOB HILL ROAD
TAMARAC, FL 33321

New Mailing Address:

FEI Number: 59-1482324

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHENDELL AND ASSOCIATES P.A.
3650 N FEDERAL HWY #202
LIGHTHOUSE POINT, FL 33064 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: P
Name: MAYERS, EDWARD
Address: 7124 NORTH NOB HILL ROAD
City-St-Zip: TAMARAC, FL 33321

Title: D
Name: ST. CLAIR, KENNETH H
Address: 7124 NORTH NOB HILL ROAD
City-St-Zip: TAMARAC, FL 33321

Title: VP
Name: WILLIAMS, MICHAEL
Address: 7124 NORTH NOB HILL ROAD
City-St-Zip: TAMARAC, FL 33321

Title: D
Name: BOLDUC/CROUCH, CAMILLE
Address: 7124 NORTH NOB HILL ROAD
City-St-Zip: TAMARAC, FL 33321

Title: T
Name: VIVIRTO, PAT
Address: 7124 NORTH NOB HILL ROAD
City-St-Zip: TAMARAC, FL 33321

Title: S
Name: FATIGATI, JANE
Address: 7124 NORTH NOB HILL ROAD
City-St-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: EDWARD MAYERS

P

02/08/2011

Electronic Signature of Signing Officer or Director

_____ Date