## 2-24-98 B-2476 C FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Kerthan#

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

727476

(4)

1. Corporation Name					
BALI WATERFRONT CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business		Mailing Address		ı rediin facia mant redit difin india difit difit id	INN BUNIK KINU MINI MINI MINI MAK
137 SUNHARBOR DRIVE LIVERPOOL NY 13088		137 SUNHARBOR DRIVE LIVERPOOL NY 13088		3. Date Incorporated or Qualified 09/18/1973	
				4. FEI Number	Applied For Not Applicable
2. Principal Place of Business 24		2a. Mailing Address		59-2366963	\$8.75 Additional
21 106 SoutAwest WAY		26 106 Southwest WAY		5. Certificate of Status Desired	Fee Required
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing	\$5.00 May Be
22 City & State		City & State		Trust Fund Contribution	Added to Fees
23 CAMILLES, N.Y.		28 CAMILLUS, N.Y.		7. Is this nonprofit corporation a homeowners association?  ☐ Yes	
Zip,	'   Country	Zıp	Country	8. This corporation owes or has paid the co	irrent year Intangible
24 1303	<u>  25 </u>	29 13031 3	0 4.3.77		Yes 1 No
9, Name and Address of Current Registered Agent 81 Name			10. Name and Address of New Registered Agent		
1				JENNIFER DELMONICO	
2649 LAKE DR			82 Street	Address (P.O. Box Number is Not Acceptable)	ļ
SINGER ISLAND FL 33404			83		
			84 City		85 Zip Code
311				NGER ISLAND, FL	85 Zip Code 33404
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE	Sociare, typed of printed name of registered age	nt and title it applicable (NOTE: F	Registered Agent signature	required when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	STD	DELETE	1.1 TITLE	570	Change    Addition
NAME	MENTO, JOANNE		1.2 NAME	MARINO, BARBARA	
STREET ADDRESS	137 SUN HARBOR DR		1.3 STREET ADDRESS	106 Southwest WAY	i
CITY-ST-ZIP	LIVERPOOL NY		1.4 CITY-ST-ZIP	CAMILLUS, N.Y. 13031	
TITLE	PD	☐ DELETE	2.1 TITLE		Change Addition
NAME	CANETTA, ROBERT		2.2 NAME		
STREET ADDRESS	709 SCARBORO DR		2.3 STREET ADDRESS		
CITY-ST-ZIP	SYRACUSE, NY 00000		2.4 CITY-ST-ZIP		
TITLE	VPD	DELETE	3.1 TITLE	VPD	Change Addition
NAME	MENTO, FRANK F		3.2 NAME	MARINO, BEENARD .	İ
STREET ADDRESS	137 SUNHARBOR DR.		3.3 STREET ADDRESS	106 Southwest WAY	
CITY-ST-ZIP	LIVERPOOL NY		3.4. CITY-ST-ZIP	MARINO, BERNARD J. 106 SCUTHWEST WAY CAMILLUS, NY, 13031	100
TITLE		☐ DELETE	4.1 TITLE	•	Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	,		4.4 CITY-ST-ZIP		The train
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition

14. hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

DELETE

5.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

TITLE

Gernand & Marine

BERNARD J. MAR.

2-2-98

**FILED** 

Feb 24 1998 8:00am

Secretary of State

Addition