

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730106

FILED
Feb 21, 2009
Secretary of State

Entity Name: BALTIC APARTMENTS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

506 71-ST AVE
ST PETERSBURG BCH, FL 33706

New Principal Place of Business:

Current Mailing Address:

K. KARALIUS
3745 NE 171 ST #34
NORTH MIAMI BEACH, FL 33160

New Mailing Address:

FEI Number: 59-1580557 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KARALIUS, KESTUTIS
3745 NE 171 ST #34
NORTH MIAMI BEACH, FL 33160 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: D () Delete
Name: LIAUKUS, SIGITAS
Address: 21 BROWSON DRIVE
City-St-Zip: SHELDON, CT 06434

Title: PTD () Delete
Name: KARALIUS, K
Address: 3745 NE 171 ST #34
City-St-Zip: NORTH MIAMI BEACH, FL 33160

Title: S () Delete
Name: JUODIKI, R.
Address: 8934 W. 100 ST.
City-St-Zip: PALOS HILLS, IL 60465

Title: VD () Delete
Name: LVANVLERA, RUTH
Address: 506 71 A #1
City-St-Zip: ST. PETERSBURG BEACH, FL 33706

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: KESTUTIS KARALIUS

PTD

02/21/2009

Electronic Signature of Signing Officer or Director

Date