

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 08, 2006
Secretary of State

DOCUMENT# 767326

Entity Name: BELLATRIX CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**1000 EAST BLUE HERON BLVD.
RIVIERA BEACH, FL 33404**New Principal Place of Business:****Current Mailing Address:**1000 EAST BLUE HERON BLVD.
RIVIERA BEACH, FL 33404**New Mailing Address:****FEI Number:** 59-2265680**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SKRANDEL, PATRICIA M
804 BUTTONWOOD ROAD
NORTH PALM BEACH, FL 33408 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 () Delete
Name: LONGANO, TONY
Address: 1495 SOUTH BELVOIR BLVD.
City-St-Zip: SOUTH EUCLID, OH 44121

Title: T () Delete
Name: PAYNE, JOHN
Address: 92964 COUNTY ROAD #690
City-St-Zip: DOWAGIAC, MI 49047

Title: D () Delete
Name: SKRANDEL, PATRICIA M
Address: 804 BUTTONWOOD RD.
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: S () Delete
Name: HANSEN, MARIAN
Address: 1281 N OCEAN DRIVE, PHB 154
City-St-Zip: SINGER ISLAND, FL 33404

Title: VP () Delete
Name: KUIPER, VERNON
Address: 5728 ETHELWIN N E
City-St-Zip: BELMONT, MI 49306

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP (X) Change () Addition
Name: SKRANDEL, PATRICIA M
Address: 804 BUTTONWOOD RD.
City-St-Zip: NORTH PALM BEACH, FL 33408

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

Title: D (X) Change () Addition
Name: KUIPER, VERNON
Address: 5728 ETHELWIN N E
City-St-Zip: BELMONT, MI 49306

I hereby certify that the information supplied with this filing does not qualify for the 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: PATRICIA M. SKRANDEL

VP

05/08/2006

Electronic Signature of Signing Officer or Director

Date