

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00754

FILED
Mar 08, 2006
Secretary of State

Entity Name: BEL AIR PLACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

BEL AIR PLACE CONDO ASSOCIATION INC
1019 BEL AIR DR
HIGHLAND BEACH, FL 33487 US

New Principal Place of Business:

Current Mailing Address:

1019 BEL AIR DRIVE
HIGHLAND BEACH, FL 33487

New Mailing Address:

FEI Number: 65-0323279

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FINOCCHIARO, JOE
1019 BEL AIR DRIVE
HIGHLAND BEACH, FL 33487 US

Name and Address of New Registered Agent:

WILLIAMS, STEVEN
1019 BEL AIR DRIVE
HIGHLAND BEACH, FL 33487 US

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: WILLIAMS STEVEN M

03/08/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FINOCCHIARO, JOE
Address: 1019 BELAIR DR
City-St-Zip: HIGHLAND BEACH, FL

Title: TD () Delete
Name: RAMIC, RUEF
Address: 1019 BELAIR DR
City-St-Zip: HIGHLAND BEACH, FL

Title: S () Delete
Name: RAMIC, JEAN
Address: 1019 BEL AIR DRIVE
City-St-Zip: HIGHLAND BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WILLIAMS, STEVEN M
Address: 1019 BELAIR DR
City-St-Zip: HIGHLAND BEACH, FL

Title: TD (X) Change () Addition
Name: RAMIC, REUF
Address: 1019 BELAIR DR
City-St-Zip: HIGHLAND BEACH, FL

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

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: RAMIC REUF

TD

03/08/2006

Electronic Signature of Signing Officer or Director

Date