

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000470

FILED
Mar 19, 2009
Secretary of State

Entity Name: BELLA FLORIDA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

13800 S.R. 535
ORLANDO, FL 32821

New Principal Place of Business:

Current Mailing Address:

13800 S.R. 535
ORLANDO, FL 32821

New Mailing Address:

9002 SAN MARCO COURT
4TH FLOOR - ALA
ORLANDO, FL 32819

FEI Number: 59-3661541

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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: VPD () Delete
Name: COFFEY, MICHAEL
Address: 2815 PARK PLACE DRIVE
City-St-Zip: LINCOLN, NE 68506

Title: TD () Delete
Name: SWENDSON, ROBERT
Address: 1150 NORTH LOOP 1604 WEST, SUITE 108-477
City-St-Zip: SAN ANTONIO, TX 78248

Title: SD () Delete
Name: DRUSHAL, J D
Address: 1137 FOREST DRIVE
City-St-Zip: WOOSTER, OH 44691

Title: PD () Delete
Name: BOBERG, EDWARD
Address: 603 LAKE STREET #214
City-St-Zip: EXCELSIOR, MN 55331

Title: VPD () Delete
Name: IKER, JACK
Address: 6808 SAVANNAH LANE
City-St-Zip: FORT WORTH, TX 76132

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: VPD (X) Change () Addition
Name: BOBERG, EDWARD
Address: 603 LAKE STREET #214
City-St-Zip: EXCELSIOR, MN 55331

Title: PD (X) Change () Addition
Name: IKER, JACK
Address: 6808 SAVANNAH LANE
City-St-Zip: FORT WORTH, TX 76132

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: JACK IKER

PD

03/19/2009

Electronic Signature of Signing Officer or Director

Date