2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003050

FILED Mar 17, 2009 Secretary of State

Entity Name: THE BELLAMY ON BAYSHORE OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:				New Principal Place of Business:		
	RBOR ISLAND	BLVD		HARBOR ISLAND BLVD		
SUITE 270 TAMPA, F		3	SUITE TAMP/	4, FL 33602 US		
Current Mailing Address:				New Mailing Address:		
7775 S HA SUITE 270	RBOR ISLAND	BLVD		ORTH PINE AVENUE		
TAMPA, F		3	SUITE OLDSI	MAR, FL 34677 US		
FEI Number	: 73-1697215	FEI Number Applied For ()	FEI Number Not	Applicable () Certificate of Sta	atus Desired ()	
Name and	Address of C	urrent Registered Agent:	Name	and Address of New Registered	l Agent:	
777 S. HAI SUITE 270 TAMPA, F The above	L 33602 US named entity s	D BLVD	200 NO SUITE OLDSI	NY & RABIN, PA DRTH PINE AVENUE A MAR, FL 34677 US ing its registered office or register	ed agent, or both,	
	e of Florida.	DDUDAN FOO		0047/05		
SIGNATU		. BRUDNY, ESQ. ic Signature of Registered Ag		03/17/20 Date		
OFFICER	S AND DIREC	TORS:	ADDIT	'IONS/CHANGES TO OFFICERS	AND DIRECTOR	
Title: Name: Address: City-St-Zip:	RAFFO, CHARL	RE BLVD, APT #601	Title: Name: Address City-St-Z		on	
Title: Name: Address: City-St-Zip:	SD () HARURY, JAME 4201 BAYSHOR TAMPA, FL 336	RE BLVD, #1704	Title: Name: Address City-St-2	•	ion	
Title:	. ,	Delete	Title: Name:	VPT (X) Change () Additi	on	
Name: Address: City-St-Zip:	DOBKINS, DICK 4201 BAYSHOR TAMPA, FL 336	RE BLVD, #1404	Address City-St-2	•		
Name: Address:	4201 BAYSHOR TAMPA, FL 336	RE BLVD, #1404 611 Delete ORRAINE RE BLVD #1504	Address	: 4201 BAYSHORE BLVD, #1404 Zip: TAMPA, FL 33611 () Change () Additi	on	

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: CHARLIE RAFFO P 03/17/2009