2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008492

FILED Mar 26, 2007 Secretary of State

Entity Name: BELLASERA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

6620 ESTERO BLVD FT MYERS BCH, FL 33931

Current Mailing Address: New Mailing Address:

6620 ESTERO BLVD FT MYERS BCH, FL 33931

FEI Number: 20-0277610 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VOGEL, JAMES D VOGEL, JAMES D

3936 TAMIAMI TRAIL NORTH STE B 3936 TAMIAMI TRAIL NORTH STE A

NAPLES, FL 34103 US NAPLES, FL 34103 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: 03/26/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition Name: LAWRENCE, DAVID Name: FLUEGEL, DONALD

Address: 1125 S FRONTAGE RD STE 4 Address: 1303 S FRONTAGE RD STE 5
City-St-Zip: HASTINGS, MN 55033 City-St-Zip: HASTINGS, MN 55033

Title: DV () Delete Title: DV (X) Change () Addition

Name:FLUEGEL, DONALDName:GERRY, MARKAddress:1303 S FRONTAGE RD STE 5Address:1125 S FRONTAGE RD STE 4

City-St-Zip: HASTINGS, MN 55033 City-St-Zip: HASTINGS, MN 55033

Title: DS () Delete Title: DS (X) Change () Addition Name: VOGEL, JAMES D VOGEL, JAMES D

Address: 3926 TÁMIAMI TRAIL NORTH, STE B Address: 3936 TÁMIAMI TRAIL NORTH, STE A City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34103

Title: DT () Delete Title: DT (X) Change () Addition

Name: SWANSON, ROBERT Name: LAWRENCE, DAVE
Address: 1125 S FRONTAGE RD STE 4 Address: 1125 S FRONTAGE RD STE 4

City-St-Zip: HASTING, MN 55033 City-St-Zip: HASTING, MN 55033

Title: () Delete Title: DD () Change (X) Addition

 Name:
 Name:
 SCHUTT, MICHAEL

 Address:
 Address:
 2310 WESTVIEW DR

 City-St-Zip:
 City-St-Zip:
 HASTINGS, MN 55033

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: DAVE LAWRENCE DT 03/26/2007