

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009901

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: BELLA BAIA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1810 GULF SHORE BLVD NORTH  
NAPLES, FL 34102

**New Principal Place of Business:**

**Current Mailing Address:**

792 94 AVE N.  
NAPLES, FL 34108

**New Mailing Address:**

FEI Number: 20-0392826

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PUTMAN, DAVID  
C/O PUTNAM MGMT  
792 94 AVE N  
NAPLES, FL 34102 US

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

PUTNAM, DAVID  
C/O PUTNAM MGMT  
792 94 AVE N  
NAPLES, FL 34102 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: DAVID PUTNAM

04/20/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VD ( ) Delete  
Name: LICHT, MARK  
Address: 1205 KIMBALL DR  
City-St-Zip: NAPERVILLE, IL 60540

Title: PD ( ) Delete  
Name: BLOOMFIELD, ALAN  
Address: 1302 DERONE PLACE  
City-St-Zip: LEXINGTON, KY 40515

Title: S ( ) Delete  
Name: TAUBENSEE, KENT  
Address: 1850 WINDRIDGE DR  
City-St-Zip: LAKE FOREST, IL 60045

Title: D ( ) Delete  
Name: BARTON, RHODORA  
Address: 1001 LIBERTY AVE #850  
City-St-Zip: PITTSBURGH, PA 15222

Title: VPD ( ) Delete  
Name: STERLING, TOM  
Address: 529 KINGSBERRY CIRCLE  
City-St-Zip: PITTSBURGH, PA 15234

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: S (X) Change ( ) Addition  
Name: FOLZ, LINDA  
Address: 1810 GULF SHORE BLVD. N.  
City-St-Zip: NAPLES, FL 34102

Title: D (X) Change ( ) Addition  
Name: FROST, GREG  
Address: 509 WASHINGTON TRAIL  
City-St-Zip: LIMA, OH 45805

Title: VP (X) Change ( ) Addition  
Name: TAUBENSEE, KENT  
Address: 1850 WINDRIDGE DR  
City-St-Zip: LAKE FOREST, IL 60045

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

Title: P (X) Change ( ) Addition  
Name: STERLING, TOM  
Address: 529 KINGSBERRY CIRCLE  
City-St-Zip: PITTSBURGH, PA 15234

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: TOM STERLING

P

04/20/2009

Electronic Signature of Signing Officer or Director

Date