## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03073

FILED Apr 26, 2005 Secretary of State

Entity Name: ADALIA BAYFRONT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place of Business:		
ADALIA AMPA, F		IS		
urrent N	lailing Addre	ess:	New Mailing Address	s:
ADALIA AMPA, F		IS		
El Number	: 59-2635855	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:		
IEZER, S	TEVENIII			
20 S.FŔ <i>F</i>	NKLIN ST	IS		
20 S.FRA AMPA, F he above	ANKLIN ST L 33602 U		ne purpose of changing its registere	d office or registered agent, or both
20 S.FRA AMPA, F he above	ANKLIN ST L 33602 U e named entity e of Florida. RE:	submits this statement for th		
20 S.FRA AMPA, F he above i the State IGNATUI	ANKLIN ST L 33602 U e named entity e of Florida. RE: Electro	submits this statement for the	Agent	Date
20 S.FRA AMPA, F he above i the State IGNATUI	ANKLIN ST L 33602 U e named entity e of Florida. RE:	submits this statement for the	Agent	
20 S.FRA AMPA, F he above i the State IGNATUI	e named entity e of Florida.  RE: Electro S AND DIRECTOR MCLEROY, KO 10033 9TH ST	submits this statement for the spirit statemen	Agent	Date
20 S.FRAAMPA, F he above the State IGNATUI  PFFICER: tte: ame: ddress:	e named entity e of Florida.  RE:  Electro  S AND DIREC  DP (  MCLEROY, K 10033 9TH ST ST PETERSBL  DS ( GERLACH, PH 10033 9TH ST	e submits this statement for the submits this statement for the submits Signature of Registered ACTORS:  1) Delete ATHLEEN 1N - 2ND FLOOR URG, FL 33716  1) Delete	Agent  ADDITIONS/CHANGI  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KATHLEEN S. MCLEROY PD 04/26/2005