

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

2007 SEP 25 PM 3:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N04000006607

1. Entity Name
BELLA VISTA AT DELRAY BEACH CONDOMINIUM
ASSOCIATION, INC.



Principal Place of Business
110 GLEASON ST
DELRAY BEACH, FL 33483 US

Mailing Address
100 EAST LINTON BLVD
SUITE 205A
DELRAY BEACH, FL 33483 US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

09102007

Chg-NP

CR2E037 (12/06)

4. FEI Number
20-3867169

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LAUDANI, THOMAS D
185 N.E. 4TH AVENUE
#104
DELRAY BEACH, FL 33483

Name James O'Brien

Street Address (P.O. Box Number is Not Acceptable)
100 E. Linton Blvd #205A

City Delray Beach FL Zip Code 33483

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

James M. O'Brien

9/15/2007

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution: ☐

\$5.00 May Be
Added to Fees

Make check payable to:
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD
NAME LAUDANI, THOMAS D
STREET ADDRESS 185 N.E. 4TH AVENUE, #104
CITY-ST-ZIP DELRAY BEACH, FL 33483 ☒ Delete

TITLE VD
NAME MESITI, ANTHONY
STREET ADDRESS 185 N.E. 4TH AVENUE, #104
CITY-ST-ZIP DELRAY BEACH, FL 33483 ☒ Delete

TITLE STD
NAME MINICUCCI, LOUIS JR.
STREET ADDRESS 185 N.E. 4TH AVENUE, #104
CITY-ST-ZIP DELRAY BEACH, FL 33483 ☒ Delete

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Pres.
NAME William Lynch ☒ Change ☐ Addition
STREET ADDRESS 110 Gleason Street
CITY-ST-ZIP #203 Delray Beach FL 33483

TITLE VP-S
NAME Joyce Press ☒ Change ☐ Addition
STREET ADDRESS 110 Gleason Street
CITY-ST-ZIP #201 Delray Beach FL 33483

TITLE Trans.
NAME Bernard Ristuccia ☒ Change ☐ Addition
STREET ADDRESS 110 Gleason Street
CITY-ST-ZIP #301 Delray Beach FL 33483

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
300110182463
10/02/07--01037--023 **\$61.25

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

William Lynch - President

9-14-07

732-496-8815

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

al220