2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007459

City-St-Zip:

FILED Apr 01, 2009 Secretary of State

Entity Name: BELVEDERE ISLES CONDOMINIUM ASSOCIATION INC. NO. 2

Current Principal Place of Business: New Principal Place of Business: %BANYAN PROPERTY MANAGEMENT 8259 N. MILTARY TRAIL #11 2328 S CONGRESS AVE SUITE 1 C PALM BEACH GARDENS, FL 33410 WEST PALM BEACH, FL 33406 **New Mailing Address: Current Mailing Address: %BANYAN PROPERTY MANAGEMENT** 8259 N. MILTARY TRAIL #11 2328 S CONGRESS AVE SUITE 1C PALM BEACH GARDENS, FL 33410 WEST PALM BEACH, FL 33406 FEI Number: 20-2468277 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: HILLEY, DONALD V PA 860 US HWY ONE SUITE 108 NORTH PALM BEACH, FL 33408 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete NOCERA, ROCCO L SPAZIANI, JOSEPH Name: Name: 1115 GOLDEN LAKES BLVD #524 Address: 8259 N. MILITARY TRAIL #11 Address: City-St-Zip: WEST PALM BEACH, FL 33411 City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: Title: () Change (X) Addition () Delete Name: SIMPSON-SHAPIRO, JANICE Name: Address: Address: 8259 N. MILITARY TRAIL #11 City-St-Zip: City-St-Zip: PALM BEACH GARDENS, FL 33410 Title: () Delete Title: () Change (X) Addition DAY, WANDA Name: Name: Address: Address: 8259 N. MILITARY TRAIL #11

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.

City-St-Zip:

PALM BEACH GARDENS, FL 33410

SIGNATURE: JANICE SIMPSON-SHAPIRO VP 04/01/2009