2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2009
Secretary of State

DOCUMENT# N04000010298

Entity Name: LA BELLA VITA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

220-108 AVE
TREASURE ISLAND, FL 33706

New Principal Place of Business:

Current Mailing Address:

C/O LAMONT MGMT
250 104TH AVE
TREASURE ISLAND, FL 33706

New Mailing Address:

FEI Number: 30-0282775 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAMONT, SUE
250 104TH AVE
SAINT PETERSBURG, FL 33706 US

Name and Address of New Registered Agent:

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:

Title: DP ( ) Delete
Name: MCDONALD, CHRISTOPHER
Address: PO BOX 670
City-St-Zip: LOGANVILLE, GA 30052

Title: S ( ) Delete
Name: MATYSZYK, GLORIA
Address: 220 108TH AVE #301
City-St-Zip: SAINT PETERSBURG, FL 33706

Title: P ( ) Delete
Name: LOEFGREN, LYNN
Address: 220 108TH AVE
City-St-Zip: TREASURE ISLAND, FL 33706

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ST (X) Change ( ) Addition
Name: BENDER, MICHAEL S ESQ.
Address: 220 108TH AVE. #404
City-St-Zip: TREASURE ISLAND, FL 33706

Title: V (X) Change ( ) Addition
Name: MATYSZYK, GLORIA
Address: 220 108TH AVE #301
City-St-Zip: SAINT PETERSBURG, FL 33706

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

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: GLORIA MATYSZYK VP 03/20/2009

Electronic Signature of Signing Officer or Director — Date