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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # N04210 (3)

BEL CREST CONDOMINIUM, INC.

Principal Place	of Business	Mailing Address				T HABIIINDI BII BABII BIBIB IHBEL IIDIK B T	DII OIOII BIBAH DIDIR DI	DH BIGIN BIGIN HOBI
HERBERT W LEONHARDT SR TOG BAYWAY BOULEVARD CLEARWATER FL 34630-2609  HERBER W LEONHARDT SI TOG BAYWAY BOULEVARD CLEARWATER FL 34630-2609  CLEARWATER FL 34630-2609			OULEVARD					
US		Ü\$				3. Date incorporated or Qualified 07/17/1984	3a. Date of La 02/06	
2. Principal Pla	ace of Business	2a. Mailing Addre	988			4. FEI Number NOT APPLICABLE		Applied For Not Applicable
Suite, Apt. #	#, etc.	Suite, Apt. #,	etc.			Certificate of Status Desired	\$8.`	75 Additional
22		27				Certificate of Status Desired	<del></del>	e Required
City & State		City & State				Election Campaign Financing     Trust Fund Contribution		00 May Be
Zip	Country	Zip	Cour	ntry		B. This corporation has liability for injury	<del></del>	ded to Fees s. 199.032.
24	25 29 30		30	Florida Statutes		5. 100100E;		
	9. Name and Address of Curren	nt Registered Agent		81 Nan		10. Name and Address of New Re	gistered Agent	
I EUNIDA	DOT HEDDEOT W 60		L					
	.rdt, herbert w Sr 'way blyd		<b>62</b> Str		et Addres	ss (P.O. Box Number is Not Acceptable	)	
	ATER FL 33515		t	B3	<del>.</del>			
			}	B4 City			les I	Zip Code
						_	FL	·
<ol> <li>Pursuant to or registere</li> </ol>	to the provisions of Sections 617.0502 ed agent, or both, in the State of Flori	2 and 617.1508, Florida ida. Such⊾change was a	Statutes, the above authorized by the co	/e-named orporatio	l corporati	ion submits this statement for the purpoof directors. I hereby accept the appoir	ose of changing it	s registered office ed agent. I am
familiar wit	th, and accept the obligations of Sec	tion 617/0503, Florida	ututes.	,		3-0 61		
SIGNATURE _	Signature Signature of registres the	t and the if applicable:	(NOTE: Registered /	Agent signati	re required w	when reinstaling)	DATE	<del></del>
12.		ID DIRECTORS	13.	· · · · · · · · · · · · · · · · · · ·	·	ADDITIONS/CHANGES TO OFFIC		TORS IN 12
TILLE	PD	DELI	TE 1.5 TIT	LE			Chang	e 🔲 Addition
NAME	LEONHARDT, HERBERT W., :	S	1.2 NA	ME				
		•			1			
STREET ADDRESS	706 BAYWAY BLVD			REET ADORE	ss			
CITY-ST-ZIP		□DELI	1.4 CIT	Y-ST-ZIP	SS		☐ Chang	e 🔲 Addilijon
	706 BAYWAY BLVD CLEARWATER FL		1.4 CIT	Y-ST-ZIP LE	SS .		Chang	e 🗖 Addilion
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certify that the information indicated on this annual report or suppliemental annual 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 12 or Block 13 if changed, or on an attachment with a report 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 12 or Block 13 if changed, or on an attachment with a report of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name

SIGNATURE:

3-4-96 H3-442-44920