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SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 MAY 19 AM 8:46

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2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N05000004608

1. Entity Name
BELLAMARE AT WILLIAMS ISLAND CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
6000 ISLAND BOULEVARD AVENTURA, FL 33160	6000 ISLAND BOULEVARD AVENTURA, FL 33160

04272006 Chg-NP CR2E037 (4/06)

2. Principal Place of Business	3. Mailing Address
6000 Island Blvd	6000 Island Blvd
Suite, Apt. #, etc. #3200	Suite, Apt. #, etc. #3200
City & State Aventura FL	City & State Aventura FL
Zip 33160 Country USA	Zip 33160 Country USA

4. FEI Number
20-2805899
☐ 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
HASTINGS, VIVIEN N 24301 WALDEN CENTER DRIVE SUITE 300 BONITA SPRINGS, FL 34134	Name: Dargelo Garcia Street Address (P.O. Box Number is Not Acceptable): 6000 Island Blvd #3200 City: Aventura FL Zip Code: 33160

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: Dargelo Garcia 4/28/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BANKHURST, GREG 13450 W. SUNRISE BOULEVARD SUITE 420 SUNRISE, FL 33323	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Harold Richman 6000 Island Blvd Aventura, FL 33160	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD SORENSEN, STEVEN S 13450 W. SUNRISE BOULEVARD SUITE 420 SUNRISE, FL 33323	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Jay Eichel 6000 Island Blvd Aventura, FL 33160	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD TIEBOUT-TOURON, MARCIENNE 24301 WALDEN CENTER DRIVE, SUITE 300 BONITA SPRINGS, FL 34134	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Jack Weinstock 6000 Island Blvd Aventura, FL 33160	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Hunk Berg 6000 Island Blvd Aventura, FL 33160	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director at Large Samuel Marcos Wagner 6000 Island Blvd Aventura, FL 33160	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Jack Weinstock 4/28/06 305-749-3240
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #