

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004608

FILED
Feb 21, 2008
Secretary of State

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

Current Principal Place of Business:

6000 ISLAND BOULEVARD
SUITE 3200
AVENTURA, FL 33160

New Principal Place of Business:

Current Mailing Address:

6000 ISLAND BOULEVARD
SUITE 3200
AVENTURA, FL 33160

New Mailing Address:

FEI Number: 20-2805899 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

REINHARD, SANFORD W
2875 NE 191ST
SUITE 404
AVENTURA, FL 33180 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: P () Delete
Name: EICHEL, JAY
Address: 6000 ISLAND BLVD SUITE 3200
City-St-Zip: AVENTURA, FL 33160

Title: VP () Delete
Name: BERG, HANK
Address: 6000 ISLAND BLVD SUITE 3200
City-St-Zip: AVENTURA, FL 33160

Title: SD () Delete
Name: WEINSTOCK, JACK
Address: 6000 ISLAND BOULEVARD
City-St-Zip: AVENTURA, FL 33160

Title: T () Delete
Name: BERKOWITZ, RICHARD
Address: 6000 ISLAND BLVD SUITE 3200
City-St-Zip: AVENTURA, FL 33160

Title: DAT () Delete
Name: MARCOSENANER, SAMUEL
Address: 6000 ISLAND BLVD
City-St-Zip: AVENTURA, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: WEINSTOCK, JACK
Address: 6000 ISLAND BOULEVARD SUITE 3200
City-St-Zip: AVENTURA, FL 33160

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

Title: DAT (X) Change () Addition
Name: LIEBMANN, ALFRED
Address: 6000 ISLAND BLVD SUITE 3200
City-St-Zip: AVENTURA, FL 33160

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: JAY EICHEL

P

02/21/2008

Electronic Signature of Signing Officer or Director

Date