2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004658

FILED Apr 27, 2009 Secretary of State

Entity Name: BELLE TERRE BUSINESS AND PROFESSIONAL CENTER CONDOMINIUM ASSOCIATION INC

Current Principal Place of Business:		New Principal Place of Business:		
0 LEANN 'ALM COA	IWAY AST, FL 3213	7		
Current Mailing Address:		New Mailing Address:		
O. BOX:	350037 AST, FL 3213	5		
El Number:	: 90-0265604	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:		
	E & CHRISTIN	IE, P.A.		
t. Augu	DVA STREET ISTINE, FL 32			
T. AUGU he above	STINE, FL 32		purpose of changing its registere	ed office or registered agent, or both,
T. AUGU he above	STINE, FL 32 named entity: of Florida. RE:	submits this statement for the		
T. AUGU he above the State	STINE, FL 32 named entity: of Florida. RE:			ed office or registered agent, or both, Date
T. AUGU he above the State	STINE, FL 32 named entity: of Florida. RE:	submits this statement for the	ent	
T. AUGU he above i the State	named entity of a property of the second sec	submits this statement for the nic Signature of Registered Ag TORS: Delete	ent	Date
T. AUGU he above the State IGNATUF FFICERS ttle: ame: ddress:	named entity of e of Florida. RE: Electron S AND DIREC SD () KOCH, JAMES P.O. BOX 1170 FLAGLER BEA PD () LEATH, DALE	submits this statement for the nic Signature of Registered Ag TORS:) Delete CH, FL 32136) Delete TER PARK BLVD. #403	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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: DALE LEATH P 04/27/2009