

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 15, 2008
Secretary of State

DOCUMENT# N06000003130

Entity Name: PROMENADES AT BELLA TRAE CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 327795044**New Principal Place of Business:****Current Mailing Address:**2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 327795044**New Mailing Address:****FEI Number:** 16-1754082**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HART, JAMES W JR.
% SENTRY MANAGEMENT, INC.
2180 WEST S.R. 434, SUITE 5000
LONGWOOD, FL 32779 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:** PD () Delete
Name: CABRERA, DIANA
Address: 4901 VINELAND RD SUITE 500
City-St-Zip: ORLANDO, FL 32811**Title:** VST () Delete
Name: EMERSON, KIM
Address: 4901 VINELAND RD SUITE 500
City-St-Zip: ORLANDO, FL 32811**Title:** D () Delete
Name: PETRIE, COLEMAN A JR
Address: 1272 GRADY LN
City-St-Zip: CHAMPIONS GATE, FL 33896**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** VST (X) Change () Addition
Name: BALL, CLINT
Address: 4901 VINELAND RD SUITE 500
City-St-Zip: ORLANDO, FL 32811**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: DIANA CABRERA

PD

10/15/2008

Electronic Signature of Signing Officer or Director

Date