2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003147

Apr 23, 2009 Secretary of State

Entity Name: BELLA MARGUERITE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

3805 GULF BLVD

ST. PETE BEACH, FL 33706

Current Mailing Address: New Mailing Address:

P.O. BOX 14357 CLEARWATER, FL 33766

FEI Number: 20-4524237 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:

AMERI-TECH REALTY, INC 1799-B NORTH BELCHER ROAD

AMERI-TECH REALTY, INC 24701 US HIGHWAY 19 N SUITE #102 CLEARWATER, FL 33765 CLEARWATER, FL 33763

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: MICHAEL G PEREZ, PRESIDENT 04/23/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

MASO, DAVID MASO, DAVID Name: Name: 3805 GULF BLVD #203 Address: 3805 GULF BLVD Address:

City-St-Zip: ST PETE BEACH, FL 33706 City-St-Zip: ST PETE BEACH, FL 33706

Title: VPD () Delete Title: PD (X) Change () Addition VILLANI, CARMINE Name: VILLANI, CARMINE Name:

Address: 3805 GULF BLVD #504 Address: 3805 GULF BLVD City-St-Zip: ST PETE BEACH, FL 33706 City-St-Zip: ST PETE BEACH, FL 33706

Title: TD () Delete Title: **VPD** (X) Change () Addition ROSSI, JAMES ROSSI, JAMES Name: Name:

3805 GULF BLVD #401 Address: Address: 3805 GULF BLVD City-St-Zip: ST PETE BEACH, FL 33706 City-St-Zip: ST PETE BEACH, FL 33706

Title: () Delete Title: TD () Change (X) Addition

Name: Name: KLACE, TIMOTHY 24701 US HIGHWAY 19 N SUITE #102 Address: Address:

City-St-Zip: City-St-Zip: CLEARWATER, FL 33763

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: CARMINE VILLANI PD 04/23/2009