

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006531

FILED  
Apr 27, 2012  
Secretary of State

**Entity Name:** BELLA TERRAZA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

355 MONUMENT RD.  
JACKSONVILLE, FL 32225

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ASPEN SQUARE MANAGEMENT, INC.  
380 UNION ST. SUITE 300  
WEST SPRINGFIELD, MA 01089

**New Mailing Address:**

**FEI Number:** 20-5063334

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: VP  
Name: CRATE, WENDY  
Address: 380 UNION ST. SUITE 300  
City-St-Zip: WEST SPRINGFIELD, MA 01089

Title: D  
Name: KEANE, PATRICK  
Address: 380 UNION ST., SUITE 300  
City-St-Zip: WEST SPRINGFIELD, MA 01089

Title: PD  
Name: STROLE, JEFFREY  
Address: 380 UNION ST., SUITE 300  
City-St-Zip: WEST SPRINGFIELD, MA 32225

Title: TREA  
Name: RICHEY, MELINDA  
Address: 355 MONUMENT RD.  
City-St-Zip: JACKSONVILLE, FL 32225

Title: D  
Name: GENNARI, JIM  
Address: 380 UNION ST, SUITE 300  
City-St-Zip: WEST SPRINGFIELD, MA 01089

I hereby 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 all other like empowered.

SIGNATURE: MELINDA RICHEY

TREA

04/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date