

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 12, 2011
Secretary of State

DOCUMENT# N12072

Entity Name: BELFORT CONDOMINIUM A ASSOCIATION, INC.**Current Principal Place of Business:**BELFORT A
9907 SOUTH BELFORT CIRCLE
TAMARAC, FL 33321 US**New Principal Place of Business:**C/O CONSOLIDATED COMMUNITY MANAGEMENT
7124 N. NOB HILL RD
TAMARAC, FL 33321 US**Current Mailing Address:**BELFORT A
9907 SOUTH BELFORT CIRCLE
TAMARAC, FL 33321 US**New Mailing Address:**C/O CONSOLIDATED COMMUNITY MANAGEMENT
7124 N. NOB HILL RD
TAMARAC, FL 33321 US**FEI Number:** 59-2598793**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**KUPPERMAN, DAVID A
100 EAST LINTON BOULEVARD,
SUITE 502-B
DELRAY BEACH, FL 33483 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:** T
Name: MANN, RHODA
Address: 7124 N. NOB HILL RD
City-St-Zip: TAMARAC, FL 33321**Title:** VP
Name: RICHMAN, SONDRRA
Address: 7124 N. NOB HILL RD
City-St-Zip: TAMARAC, FL 33321**Title:** P
Name: FRED, POMERANTZ
Address: 7124 N. NOB HILL RD
City-St-Zip: TAMARAC, FL 33321**Title:** S
Name: SNEIDER, BARBARA
Address: 7124 N. NOB HILL RD
City-St-Zip: TAMARAC, FL 33321

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: FRED POMERANTZ

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10/12/2011

Electronic Signature of Signing Officer or Director

Date