2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2009
Secretary of State

DOCUMENT# N14262

Entity Name: BELFORT CONDOMINIUM G ASSOCIATION, INC.

Current Principal Place of Business:

C/O SUNDANCE PROPERTY MANAGEMENT
3275 W HILLSBORO BLVD STE 312
DEERFIELD BEACH, FL 33442 US

New Principal Place of Business:

Current Mailing Address:

C/O SUNDANCE PROPERTY MANAGEMENT
3275 W HILLSBORO BLVD STE 312
DEERFIELD BEACH, FL 33442 US

New Mailing Address:

FEI Number: 59-2650548 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VALANCY, STEVEN S
311 SE 13TH STREET
FORT LAUDERDALE, FL 33316 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: ARBETSMAN, HOWARD
Address: 9774 N BELFORT CIRCLE
City-St-Zip: TAMARAC, FL 33321

Title: VD ( ) Delete
Name: VITA, ANTHONY,
Address: 9776 N BELFORT CIR
City-St-Zip: TAMARAC, FL

Title: T ( ) Delete
Name: VITA, LILA
Address: 9776 E. BELFORT CIRCLE
City-St-Zip: TAMARAC, FL

Title: SD ( ) Delete
Name: COHEN, ELAINE
Address: 9788 N BELFORT CIR
City-St-Zip: TAMARAC, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: KERMIT, LANDRESS
Address: 9907 S. BELFORT CIRCLE
City-St-Zip: TAMARAC, FL 33321

Title: VD (X) Change ( ) Addition
Name: VITA, ANTHONY,
Address: 9907 S. BELFORT CIRCLE
City-St-Zip: TAMARAC, FL 33321

Title: T (X) Change ( ) Addition
Name: VITA, LILA
Address: 9907 S. BELFORT CIRCLE
City-St-Zip: TAMARAC, FL 33321

Title: SD (X) Change ( ) Addition
Name: COHEN, ELAINE
Address: 9907 S. BELFORT CIRCLE
City-St-Zip: TAMARAC, FL 33321

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: KERMIT LANDRESS PD 01/08/2009

Electronic Signature of Signing Officer or Director — Date