

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 05, 2006 8:00 am
Secretary of State

06-05-2006 90148 021 ****61.25

DOCUMENT # N21375

1. Entity Name
BELFORT CONDOMINIUM L ASSOCIATION, INC.



Principal Place of Business
**CO CASTLE GROUP
POST OFFICE BOX 189013
PLANTATION, FL 33318**

Mailing Address
**CO CASTLE GROUP
POST OFFICE BOX 189013
PLANTATION, FL 33318**

50020680



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04152006

Chg-NP

CR2E037 (11/05)

City & State

City & State

4. FEI Number
59-2814997

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**THE LAW OFFICE OF KATZMAN & KORR, P.A.
1501 NW 49TH ST., STE. 202
FORT LAUDERDALE, FL 33309**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME MICHEL, HERMAN
STREET ADDRESS 9440 SO BELFORT CR
CITY-ST-ZIP TAMARAC, FL

TITLE VD ☐ Delete
NAME SCHWARTZ, MONA
STREET ADDRESS 9444 S. BELFORT CR.
CITY-ST-ZIP TAMARAC, FL 33321

TITLE TD ☐ Delete
NAME KANTRA, MILLIE
STREET ADDRESS 9498 S. BELFORT CR #204
CITY-ST-ZIP TAMARAC, FL 33321

TITLE VD ☐ Delete
NAME FALCO, BERNADETTE
STREET ADDRESS 9446 S BELFORT CR
CITY-ST-ZIP TAMARAC, FL 33321

TITLE SD ☐ Delete
NAME BURNS, PAULINE
STREET ADDRESS 9458 SO BELFORT CR
CITY-ST-ZIP TAMARAC, FL 33321

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Herman Michel
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date 5/13/06 954-721-2983
Daytime Phone #

Herman Michel