2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Mar 28, 2007 08:00 AN DOCUMENT # N41625 1. Entity Name **Secretary of State** BELLAVISTA VILLAGE CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Addross C/O PRME MANAGEMENT GROUP 6300 PARK OF COMMERCE BLVD. BOCA RATON FL 33487 C/O PRME MANAGEMENT GROUP 6300 PARK OF COMMERCE BLVD. BOCA RATON FL 33487 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) Applied For City & State City & State 4. FEI Number 65-0285335 Not Applicable Zο Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SWATT, MYRON Street Address (P.O. Box Number is Not Acceptable) PRIME MANAGEMENT GROUP 6300 PARK OF COMMERCE BLVD. **BOCA RATON FL 33487** Zip Code City FI 8. The above named only 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 agont. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstation) FILE NOW: FEE IS \$61.25 Make Check Payable to 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2007 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11(11)11(10)631703 125 Addition 04/04/07-80055-07; 69: 25 10, OFFICERS AND DIRECTORS 11. PD ☐ Dolete HHF HITH NAME NAME COHEN, LOU STREET ADDRESS STREET ADDRESS 5267-E EUROPA DRIVE CITY-SI-ZIP CITY - ST - ZIP **BOYNTON BEACH FL 33437** ☐ Change ☐ Addition Delete TITLE IIII ۷P MAME NAME BALABAN, HERB STREET ADDRESS STREET ADDRESS 5299 B EUROPA DRIVE CITY SI ZIP CITY - ST - ZIP BOYNTON BEACH FL 33437 Change Addition TITLE ☐ Delete TITLE SD NAME NAME FREINT, CLDYE STREE I ADDRESS STREET ADDRESS 5299-B EUROPA DRIVE CITY-S1-ZIP CITY - ST - ZIP BOYNTON BEACH FL 33437 Change ☐ Addition ☐ Delete TITLE ши MAME NAME RUBINSON, STAN STREET ADORESS STREET ADDRESS 5299-D EUROPA DRIVE CITY-ST-ZIP CITY - ST - ZIP BOYNTON BEACH FL 33437 □ Change ☐ Addition TITLE ☐ Delete TITLE MAKE ROMANO, SAL NAME STREET ADDRESS STREET ADDRESS 5291 HEUROPA DR **BOYNTON BEACH FL 33437** CITY-S1-ZIP CITY - ST - ZIP ☐ Change ☐ Addition ☐ Delete BBF 31335 MAME MANE STREET ADDRESS STREET ADDRESS CITY-SI-7P CITY-ST 78

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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. Director Steamback STANLY PUBINION SIGNATURE: THEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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