

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41625

FILED  
Feb 08, 2012  
Secretary of State

**Entity Name:** BELLAVISTA VILLAGE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O THE CONTINENTAL GROUP INC.  
6300 PARK OF COMMERCE BLVD.  
BOCA RATON, FL 33487 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O THE CONTINENTAL GROUP INC.  
6300 PARK OF COMMERCE BLVD.  
BOCA RATON, FL 33487 US

**New Mailing Address:**

**FEI Number:** 65-0285335      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

COHEN, LOUIS  
5267 EUROPA DRIVE  
APT E  
BOYNTON BEACH, FL 33437 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  
Name: COHEN, LOUIS  
Address: 5267- EUROPA DRIVE, APT E  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: VP  
Name: BALABAN, HERBERT  
Address: 5299 EUROPA DRIVE, APT E  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: TD  
Name: FREINT, CLDYE  
Address: 5299- EUROPA DRIVE APT B  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: D  
Name: ROMANO, SALVATORE  
Address: 5291-EUROPA DRIVE, APT H  
City-St-Zip: BOYNTON BEACH, FL 33437

Title: SD  
Name: KURLANTZICK, FRANCES  
Address: 5283 EUROPA DR, APT B  
City-St-Zip: BOYNTON BEACH, FL 33437

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: LOUIS COHEN

PRES

02/08/2012

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

\_\_\_\_\_  
Date