

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000002203

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Entity Name:** BLAIRS' ARCADE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

250 WORTH AVENUE, UNIT 4  
PALM BEACH, FL 33480 US

**New Principal Place of Business:**

**Current Mailing Address:**

250 WORTH AVENUE, UNIT 4  
PALM BEACH, FL 33480 US

**New Mailing Address:**

**FEI Number:** 65-0591441

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HANDESMAN, BURTON  
250 WORTH AVE.  
PALM BEACH, FL 33480 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: PSD  
Name: HANDELSMAN, BURTON  
Address: 250 WORTH AVENUE, UNIT 4  
City-St-Zip: PALM BEACH, FL 33480 US

Title: VTD  
Name: HANDELSMAN, STEVEN  
Address: 7 LOVE LANE  
City-St-Zip: HARRISON, NY 10528 US

Title: D  
Name: HANDELSMAN, LUCILLE  
Address: 250 WORTH AVENUE, UNIT 4  
City-St-Zip: PALM BEACH, FL 33480 US

Title: D  
Name: STOCKER, MARSHA  
Address: 5 LOVE LANE  
City-St-Zip: HARRISON, NY 10528

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: BURTON HANDELSMAN

MGR

04/11/2012

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

\_\_\_\_\_  
Date