2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003566

FILED Apr 13, 2009 Secretary of State

Entity Name: BELLA VISTA OCEAN CLUB CONDOMINIUM ASSOCIATION, INC.

Current Pr	incipal Place	of Business:	New Princ	New Principal Place of Business:		
SUITE 100	TH HWY A1A FIC, FL 32903	US				
Current Mailing Address:			New Maili	New Mailing Address:		
1755 NORTH HWY A1A SUITE 100 INDIALANTIC, FL 32903 US						
FEI Number:	59-3425114	FEI Number Applied For ()	FEI Number Not Appl	cable () Certifica	ate of Status Desired ()	
Name and	Address of Cu	ırrent Registered Agent:	Name and	Address of New Reg	istered Agent:	
SUITE 302 INDIALANT	TH HWY A1A TIC, FL 32903 named entity su of Florida.	US ubmits this statement for the po	urpose of changing it	s registered office or r	egistered agent, or both,	
Electronic Signature of Registered Agent			nt	 Date		
OFFICERS	AND DIRECT	ORS:	ADDITION	S/CHANGES TO OFF	ICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	TD ()[HASSOL, BOB 1755 HWY A1A # INDIALANTIC, FL		Title: Name: Address: City-St-Zip:	()Change	() Addition	
Title: Name: Address: City-St-Zip:	FILLEMAN, SPE	/Y A1A SUITE 302	Title: Name: Address: City-St-Zip:	() Change	() Addition	
Title: Name: Address: City-St-Zip:	SD () [WIACK, RICHAR 1755 N HWY A1/ INDIALANTIC, FL	A #502	Title: Name: Address: City-St-Zip:	() Change	() Addition	
Title: Name: Address: City-St-Zip:	D () [MARTIN, RICK 255 SEACREST MELBOURNE BE		Title: Name: Address: City-St-Zip:	D (X) Change MARTIS, RICK 255 SEACREST DR MELBOURNE BEACH, FL		
Title: Name: Address: City-St-Zip:	WENDELL, KISH	/Y A1A SUITE 301	Title: Name: Address: City-St-Zip:	VD (X) Change KISH, WENDELL 1755 NORTH HWY A1A S INDIALANTIC, FL 32903	. ,	

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: ROBERT HASSOL TREA 04/13/2009