**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000003147

**FILED**
**Apr 28, 2017**
**Secretary of State**
**CC4308211515**

**Entity Name:** BELLA MARGUERITE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

24701 US HIGHWAY 19 N
SUITE 102
CLEARWATER, FL 33763

**Current Mailing Address:**

24701 US HIGHWAY 19 N
SUITE 102
CLEARWATER, FL 33763 US

**FEI Number: 20-4524237**

**Certificate of Status Desired:** No

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

BROWDER, KAREN
24701 US HIGHWAY 19 N SUITE #102
CLEARWATER, FL 33763 US

*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

**Officer/Director Detail :**

| | | | |
|---|---|---|---|
| Title | PD | Title | VPD |
| Name | VILLANI, CARMINE | Name | ROSSI, JAMES |
| Address | 24701 US HIGHWAY 19 N SUITE 102 | Address | 24701 US HIGHWAY 19 N SUITE 102 |
| City-State-Zip: | CLEARWATER FL 33763 | City-State-Zip: | CLEARWATER FL 33763 |

| | |
|---|---|
| Title | TD |
| Name | POLANT, RON |
| Address | 24701 US HIGHWAY 19 N SUITE 102 |
| City-State-Zip: | CLEARWATER FL 33763 |

*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: CARMINE VILLANI PD 04/28/2017

Electronic Signature of Signing Officer/Director Detail

Date