

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

DOCUMENT# N06000006531

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

**Current Principal Place of Business:**

355 MONUMENT RD.  
JACKSONVILLE, FL 32225

**Current Mailing Address:**

C/O ARTCRAFT MANAGEMENT, INC.  
6722 PATTERSON AVENUE - STE. A  
RICHMOND, VA 23226-3400 US

**FEI Number:** 20-5063334

**Certificate of Status Desired:** Yes

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

DESAI, MAHESH  
9045 VISTA WAY  
PARKLAND, FL 33076 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 D  
Name PATEL, HIREN  
Address C/O ARTCRAFT MANAGEMENT, INC.  
6722 PATTERSON AVENUE - STE. A  
City-State-Zip: RICHMOND VA 23226-3400

Title VD  
Name RAY, ASHLEY  
Address 6722 PATTERSON AVENUE - STE. A  
City-State-Zip: RICHMOND VA 23226-3400

Title TD  
Name MANNS, TAMMY  
Address 6722 PATTERSON AVENUE - SUITE A  
City-State-Zip: RICHMOND VA 23226-3400

Title PD  
Name PARKER, ALETHEA M  
Address 6722 PATTERSON AVENUE - STE. A  
City-State-Zip: RICHMOND VA 23226-3400

Title SD  
Name LEICHSENENRING, PAM  
Address 6722 PATTERSON AVENUE - STE. A  
City-State-Zip: RICHMOND VA 23226-3400

*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:** ASHLEY RAY

VP

04/27/2017

Electronic Signature of Signing Officer/Director Detail

Date