

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23455

FILED
Apr 11, 2019
Secretary of State
7784302088CC

Entity Name: BELLA VISTA ON THE PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O COASTAL PROPERTY MANAGEMENT
10 SE CENTRAL PKWY, #400
STUART, FL 34994

Current Mailing Address:

C/O COASTAL PROPERTY MANAGEMENT
10 SE CENTRAL PKWY, #400
STUART, FL 34994 US

FEI Number: 65-0184467

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FIELDS & BACHOVE, PLLC
4440 PGA BLVD, STE 308
PALM BEACH GARDENS, FL 33410 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: EVAN BACHOVE

04/11/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name BERNSTEIN, JASON
Address C/O COASTAL PROPERTY
 MANAGEMENT
 10 SE CENTRAL PKWY, #400
City-State-Zip: STUART FL 34994

Title DIRECTOR
Name MCSWEENEY, ROSE TERRI
Address C/O COASTAL PROPERTY
 MANAGEMENT
 10 SE CENTRAL PKWY, #400
City-State-Zip: STUART FL 34994

Title TREASURER
Name MULLIGAN, WILLIAM
Address C/O COASTAL PROPERTY
 MANAGEMENT
 10 SE CENTRAL PKWY, #400
City-State-Zip: STUART FL 34994

Title SECRETARY
Name SHANKS, ROBERT
Address C/O COASTAL PROPERTY
 MANAGEMENT
 10 SE CENTRAL PKWY, #400
City-State-Zip: STUART FL 34994

Title DIRECTOR
Name GALLO, ANTHONY
Address C/O COASTAL PROPERTY
 MANAGEMENT
 10 SE CENTRAL PKWY, #400
City-State-Zip: STUART FL 34994

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: JASON BERNSTEIN

PRESIDENT

04/11/2019

Electronic Signature of Signing Officer/Director Detail

Date