


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2004 8:00 am
Secretary of State

02-02-2004 90023 005 ****61.25

DOCUMENT # 730203					
1. Entity Name BELLEVIEW BILTMORE VILLAS-BAYSHORE II, INC.					
Principal Place of Business 7300 PARK ST. SEMINOLE, FL 33777 US			Mailing Address 7300 PARK ST. SEMINOLE, FL 33777 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1560917	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
RESOURCE MANAGEMENT, INC. 7300 PARK ST. SEMINOLE, FL 33777			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL		Zip Code
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MATHIOS, NICHOLAS		NAME	Joe Smith	
STREET ADDRESS	10033 9TH STREET N, 2ND FL		STREET ADDRESS	220 Belleview Blvd # 108	
CITY-ST-ZIP	SAINT PETERSBURG, FL 33716		CITY-ST-ZIP	Belleair, FL 33756	
TITLE	TD	<input checked="" type="checkbox"/> Delete	TITLE	VPP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HEMMING, KEN		NAME	Marie Stephanson	
STREET ADDRESS	10033 9TH STREET N 2ND FLOOR		STREET ADDRESS	220 Belleview Blvd # 309	
CITY-ST-ZIP	ST PETERSBURG, FL 337163805		CITY-ST-ZIP	Belleair FL 33756	
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WARBURTON, ANN		NAME	Kevin Vance	
STREET ADDRESS	10033 9TH STREET N 2ND FLOOR		STREET ADDRESS	220 Belleview Blvd # 201	
CITY-ST-ZIP	SAINT PETERSBURG, FL 33716		CITY-ST-ZIP	Belleair FL 33756	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KORAL, RUTH		NAME	Ken Balder	
STREET ADDRESS	10033 NINTH STREET NORTH		STREET ADDRESS	220 Belleview Blvd # 303	
CITY-ST-ZIP	SAINT PETERSBURG, FL 33716		CITY-ST-ZIP	Belleair FL 33756	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Joe B. Smith</u>			Date _____ Daytime Phone # _____		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		