

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996 3-14-96

B-2204

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DOCUMENT # 754308 (5)

1. Corporation Name
BELLEVUE BILTMORE VILLAS-SOUTH GARDEN-8 BELLEVUE BLVD., INC.



Principal Place of Business: 1700 McMullen Booth Rd. Ste C3, Clearwater FL 34619
Mailing Address: 1700 McMullen Booth Rd. Ste C3, Clearwater FL 34619

3. Date Incorporated or Qualified: 09/24/1980
3a. Date of Last Report: 02/15/1995

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	59-2073063	<input type="checkbox"/>
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
23. City & State	28. City & State	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
24. Zip	29. Zip	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
25. Country	30. Country		

9. Name and Address of Current Registered Agent

LEIGHTON, LENNARD A.
1700 McMullen Booth Road
Suite C3
Clearwater FL 34619

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	FL
83.	
84. City	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when necessary) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D YOUNG, LUCIA 8 BELLEVUE BLVD #108 BELLEAIR FL	1.1 TITLE	VP NAWN, LUCIA YOUNG 8 BELLEVUE BLVD., #108 BELLEAIR, FL
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	PD DONLAN, JOHN 8 BELLEVUE BLVD #207 BELLEAIR FL	2.1 TITLE	SD KETCHUM, LEE 8 BELLEVUE BLVD. #202 BELLEAIR, FL
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	SD HOLT, RICHARD 8 BELLEVUE BA1LVD, #103 BELLEAIR FL	3.1 TITLE	PD HOLT, RICHARD 8 BELLEVUE BLVD., #103 BELLEAIR, FL
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	VPD MAUPIN, HAROLD 8 BELLEVUE BLVD #403 BELLEAIR FL	4.1 TITLE	TD OTTO, BOB 8 BELLEVUE BLVD., 704 BELLEAIR, FL
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	TD CADGENE, GEORGE 8 BELLEVUE BLVD #508 BELLEAIR FL	5.1 TITLE	D MONBERG, WARREN 8 BELLEVUE BLVD., #603 BELLEAIR, FL 34616
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Lucia Young Nawn 4 Mar 96 (813) 446-5832
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Lucia Young Nawn - VP

CR2E037 (12/95)