

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-24-2003 90274 031 ****61.25

DOCUMENT # 755027

1. Entity Name
BELLA VISTA COMMUNITY FACILITIES, INC.

Principal Place of Business: **1127 SEMINOLE E., 35-A JUPITER FL 33477**
Mailing Address: **1127 SEMINOLE E., 35-A JUPITER FL 33477**

2. Principal Place of Business: Suite, Apt. #, etc.
3. Mailing Address: Suite, Apt. #, etc.

City & State: City & State

Zip: Country Zip: Country

4. FEI Number **35-1109992** Applied For: Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

11013713



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent
**MILLER, MAUREEN
1127 SEMINOLE EAST
34D
JUPITER FL 33477**

7. Name and Address of New Registered Agent
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: _____ (NOTE: Registered Agent signature required when reinstating)
DATE: _____

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$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: DV NAME: WEINERT, RICHARD W STREET ADDRESS: 850 BELLA VISTA COURT, S CITY-ST-ZIP: JUPITER FL 33477 <input checked="" type="checkbox"/> Delete		TITLE: DV NAME: ROBERT SHANKS STREET ADDRESS: 740 BELLA VISTA COURT, S CITY-ST-ZIP: JUPITER, FL 33477 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE: DT NAME: CICOTTE, DENNIS STREET ADDRESS: 1127 SEMINOLE EAST 21C CITY-ST-ZIP: JUPITER FL 33477 <input checked="" type="checkbox"/> Delete		TITLE: DT NAME: NEIL MURPHY STREET ADDRESS: 1127 SEMINOLE E. #35A CITY-ST-ZIP: JUPITER, FL 33477 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE: DP NAME: MILLER, MAUREEN STREET ADDRESS: 1127 SEMINOLE EAST # 34D CITY-ST-ZIP: JUPITER FL 33477 <input type="checkbox"/> Delete		TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-ST-ZIP: _____ <input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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: **NEIL MURPHY** Dir/TR

CR2E037 (10/02)