

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 29, 2004
Secretary of State**

DOCUMENT# 755028

Entity Name: BELLA VISTA HOMEOWNERS ASSOCIATION INC.

Current Principal Place of Business:

1127 SEMINOLE E 35-A
JUPITER, FL 33477

New Principal Place of Business:

26858 HICKORY BOULEVARD
BONITA SPRINGS, FL 34134

Current Mailing Address:

1127 SEMINOLE E 35-A
JUPITER, FL 33477

New Mailing Address:

26858 HICKORY BOULEVARD
BONITA SPRINGS, FL 34134

FEI Number: 59-2155592

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, MAUREEN
1127 SEMINOLE EAST
34D
JUPITER, FL 33477 US

Name and Address of New Registered Agent:

HANSEN, GREGORY J
26858 HICKORY BOULEVARD
BONITA SPRINGS, FL 34134 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: GREGORY J. HANSEN

04/29/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MILLER, MAUREEN
Address: 1127 SEMINOLE E #34
City-St-Zip: JUPITER, FL 33477

Title: DS () Delete
Name: FORD, SANDRA G
Address: 1127 SEMINOLE E. #35A
City-St-Zip: JUPITER, FL 33477

Title: DT () Delete
Name: MURRAY, NEIL
Address: 1127 SEMINOLE E. #35A
City-St-Zip: JUPITER, FL 33477

Title: DV (X) Delete
Name: DOUGLAS, MORTON
Address: 1127 SEMINOLE E #13D
City-St-Zip: JUPITER, FL 33477

Title: D (X) Delete
Name: HORAN, JOSEPH
Address: 1127 SEMINOLE E. #35A
City-St-Zip: JUPITER, FL 33477

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: HANSEN, GREGORY J
Address: 26858 HICKORY BOULEVARD
City-St-Zip: BONITA SPRINGS, FL 34134

Title: DVP (X) Change () Addition
Name: THOMPSON, JUDITH G
Address: 26868 HICKORY BOULEVARD
City-St-Zip: BONITA SPRINGS, FL 34134

Title: DS (X) Change () Addition
Name: SALZMAN, JEFFREY D
Address: 26858 HICKORY BOULEVARD
City-St-Zip: BONITA SPRINGS, FL 34134

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: GREGORY J. HANSEN

DP

04/29/2004

Electronic Signature of Signing Officer or Director

Date