


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006 8:00 am
Secretary of State

04-13-2006 90282 040 ****70.00

DOCUMENT # N05000008211	
1. Entity Name BELLA VILLINO IV CONDOMINIUM ASSOCIATION, INC.	

Principal Place of Business 4100 CENTRAL SARASOTA PARKWAY SARASOTA, FL 34238	Mailing Address 4100 CENTRAL SARASOTA PARKWAY SARASOTA, FL 34238
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

01312006 Chg-NP CR2E037 (11/05)

6. Name and Address of Current Registered Agent	
RYSKAMP, PATRICK W. 200 SOUTH ORANGE AVENUE SARASOTA, FL 34236	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

4. FEI Number 20-3286745	Applied For Not Applicable
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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2006	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
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TAYLOR, J. DAVID 4100 CENTRAL SARASOTA PARKWAY SARASOTA, FL 34238 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD TAYLOR, ELIZABETH E 4100 CENTRAL SARASOTA PARKWAY SARASOTA, FL 34238 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TSD HOLMES, PAMELA 4100 CENTRAL SARASOTA PARKWAY SARASOTA, FL 34238 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D Ronald Sieg 4138 Central Sarasota Pkwy #1525 Sarasota, FL 34238 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D Lisa Michelle Szabo 12942 Nightshade Place Bradenton, FL 34202 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Ronald Sieg **RONALD SIEG** Date: 4/10/06 Daytime Phone #: 941/918-2636