

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011252

FILED
Jul 06, 2006
Secretary of State

Entity Name: BELLAVIDA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5200 VINELAND RD
STE 200
ORLANDO, FL 32811

New Principal Place of Business:

Current Mailing Address:

5200 VINELAND RD
STE 200
ORLANDO, FL 32811

New Mailing Address:

FEI Number: 20-4312895 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GUPTA, SURESH
5200 VINELAND RD
STE 200
ORLANDO, FL 32811 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CAVARETTA, CHARLES F
Address: 5200 VINELAND RD - STE 200
City-St-Zip: ORLANDO, FL 32811

Title: D () Delete
Name: DILGER, GARY
Address: 5200 VINELAND RD - STE 200
City-St-Zip: ORLANDO, FL 32811

Title: D () Delete
Name: TANEJA, SANDEEP
Address: 5200 VINELAND RD - STE 200
City-St-Zip: ORLANDO, FL 32811

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: GUPTA, VISHAAL S
Address: 5200 VINELAND RD - STE 200
City-St-Zip: ORLANDO, FL 32811

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: CHARLES F. CAVARETTA

D

07/06/2006

Electronic Signature of Signing Officer or Director

Date