

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 26, 2009  
Secretary of State**

DOCUMENT# N07000002859

Entity Name: BELMONT PARK HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

1701 EAST GARY RD  
LAKELAND, FL 33801

**New Principal Place of Business:**

**Current Mailing Address:**

1701 EAST GARY RD  
LAKELAND, FL 33801

**New Mailing Address:**

FEI Number: 26-2231765      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WALLER, BRIAN  
1701 EAST GARY RD  
LAKELAND, FL 33801      US

**Name and Address of New Registered Agent:**

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: PD ( ) Delete  
Name: WALLER, BRIAN  
Address: 1701 EAST GARY RD  
City-St-Zip: LAKELAND, FL 33801

Title: VPD ( ) Delete  
Name: WALLER IV, ROBERT J  
Address: 1701 EAST GARY RD  
City-St-Zip: LAKELAND, FL 33801

Title: STD ( ) Delete  
Name: WALLER, TOM  
Address: 1701 EAST GARY RD  
City-St-Zip: LAKELAND, FL 33801

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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 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: BRIAN WALLER

PD

02/26/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date