


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 14, 2007 8:00 am
Secretary of State

06-14-2007 90001 035 ****61.25

DOCUMENT # N96000000219

1. Entity Name
 BEVERLY HILLS COMMUNITY COUNCIL, INC.



40120710

Principal Place of Business
 B.H COMMUNITY BLDG
 CIVIC CIRCLE
 BEVERLY HILLS, FL 34465

Mailing Address
 B.H. COMMUNITY COUNCIL
 1 CIVIC CIRCLE
 BEVERLY HILLS, FL 34465



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

06082007 Chg-NP CR2E037 (12/06)

City & State

4. FEI Number
 NOT APPLICABLE

Applied For
 Not Applicable

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MANSMANN, KATHLEEN
 3580 N WILLOWTREE PT
 BEVERLY HILLS, FL 34465

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 _____ 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 September 14, 2007

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 **S** Delete
 NAME **VOLLMER, DOUGLAS**
 STREET ADDRESS **4124 DAVIS ST**
 CITY-ST-ZIP **BEVERLY HILLS, FL 34465**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **C** Delete
 NAME **COLBERT, MIKE**
 STREET ADDRESS **4759 N. CRESTLINE DRIVE**
 CITY-ST-ZIP **BEVERLY HILLS, FL 34465**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **MANSMANN, KATHLEEN**
 STREET ADDRESS **3580 N WILLOWTREE PT**
 CITY-ST-ZIP **BEVERLY HILLS, FL 34465**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **OSTERHOUDT, DONALD**
 STREET ADDRESS **4622 N. JADEMOOR DRIVE**
 CITY-ST-ZIP **BEVERLY HILLS, FL 34465**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **PETERSON, PETE**
 STREET ADDRESS **882 COLBERT CT**
 CITY-ST-ZIP **BEVERLY HILLS, FL 34465**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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: *Michael Colbert, Chairman* 6-13-07 305-746-1331
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #