

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735919

Entity Name: BELLEVIEW BILTMORE VILLAS-BAYGREEN, INC.**Current Principal Place of Business:**5901 SUN BLVD
SUITE 103
ST PETERSBURG, FL 33715**Current Mailing Address:**5901 SUN BLVD
SUITE 103
ST PETERSBURG, FL 33715 US**FEI Number:** 59-1690412**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RABIN PARKER
28059 US HWY 19 NORTH
SUITE 301
CLEARWATER, FL 33761 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

Officer/Director Detail :

Title TREASURER
Name ALFANO, LINDA
Address 5901 SUN BLVD
 SUITE 103
City-State-Zip: ST PETERSBURG FL 33715

Title DIRECTOR
Name WIGFALL, VICTOR
Address 5901 SUN BLVD
 SUITE 103
City-State-Zip: ST PETERSBURG FL 33715

Title VP
Name SCHOUWENAARS, ANNEKE
Address 5901 SUN BLVD
 SUITE 103
City-State-Zip: ST PETERSBURG FL 33715

Title DIRECTOR
Name JEUTTER, CHRISTA
Address 50 COE RD UNIT 236
City-State-Zip: CLERWATER FL 33756

Title SECRETARY
Name FREITAG, HERBERT
Address 5901 SUN BLVD
 SUITE 103
City-State-Zip: ST PETERSBURG FL 33715

Title PRESIDENT
Name SIMMONS, TERRY
Address 5901 SUN BLVD
 SUITE 103
City-State-Zip: ST. PETERSBURG FL 33715

Title DIRECTOR
Name PINKENS, MICHAEL
Address 50 COE RD
City-State-Zip: CLEARWATER FL

Title DIRECTOR
Name MONROE, RODNEY
Address 50 COE RD UNIT 324
City-State-Zip: CLEARWATER FL 33756

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I hereby 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 all other like empowered.

SIGNATURE: TERRY SIMMONS**PRESIDENT****04/18/2022**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	TREMBOUR, ELSA
Address	50 COE RD UNIT 323
City-State-Zip:	CLEARWATER FL 33756