

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735919

Entity Name: BELLEVIEW BILTMORE VILLAS-BAYGREEN, INC.**Current Principal Place of Business:**7300 PARK STREET
SEMINOLE, FL 33777**Current Mailing Address:**7300 PARK STREET
SEMINOLE, FL 33777 US**FEI Number:** 59-1690412**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RABIN PARKER
28163 US HWY 19 N
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	P	Title	VP
Name	SCHWARTZ, MIKE	Name	EVANS, JAMES
Address	7300 PARK STREET	Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777	City-State-Zip:	SEMINOLE FL 33777
Title	SECRETARY	Title	TREASURER
Name	BURKETT-YOUNG, LAURIE	Name	ALFANO, LINDA
Address	7300 PARK STREET	Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777	City-State-Zip:	SEMINOLE FL 33777
Title	D	Title	DIRECTOR
Name	DALESSANDRO, BETH	Name	FREITAG, HERB
Address	5901 SUN BLVD.	Address	7300 PARK STREET
City-State-Zip:	SAINT PETERSBURG FL 33715	City-State-Zip:	SEMINOLE FL 33777
Title	DIRECTOR		
Name	NELSON, KEN		
Address	7300 PARK STREET		
City-State-Zip:	SEMINOLE FL 33777		

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: MIKE SCHWARTZ**PRESIDENT****04/22/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date