

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000003761

**Entity Name:** BELMERE HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**4004 EDGE WATER DR  
ORLANDO, FL 32804**Current Mailing Address:**4004 EDGE WATER DR  
ORLANDO, FL 32804**FEI Number: 59-3722917****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**RIVERA, MARY  
4004 EDGE WATER DRIVE  
ORLANDO, FL 32804 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 D, TREASURER  
Name CLOVIS, ROY  
Address 4004 EDGE WATER DR  
City-State-Zip: ORLANDO FL 32804

Title D, PRESIDENT  
Name GARRISON, JIM S  
Address 4004 EDGE WATER DR  
City-State-Zip: ORLANDO FL 32804

Title D, VP  
Name ACEITUNO, CARLOS  
Address 4004 EDGE WATER DR  
City-State-Zip: ORLANDO FL 32804

Title DIRECTOR, SECRETARY  
Name ORLANDO, JOSEPH  
Address 4004 EDGE WATER DR  
City-State-Zip: ORLANDO FL 32804

Title DIRECTOR  
Name PIZZI, GAETANO  
Address 4004 EDGE WATER DR  
City-State-Zip: ORLANDO FL 32804

*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: JIM GARRISON****PRESIDENT****04/19/2013**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date