# 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N0500002740

## Entity Name: BELLS RIVER ESTATES HOMEOWNERS ASSOCIATION, INC.

## **Current Principal Place of Business:**

2002 SAN MARCO BLVD. SUITE 203 JACKSONVILLE, FL 32207

## **Current Mailing Address:**

2220 CR 210 W SUITE 108-128 SAINT JOHNS, FL 32259 US

#### FEI Number: 20-2510894

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

PREMIER FLORIDA PROPERTY MANAGEMENT C/O PREMIER FLORIDA PROPERTY MANAGEMENT 2220 COUNTY ROAD 210 W STE 108-128 SAINT JOHNS, FL 32259 US Certificate of Status Desired: No

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:                | IAN ROBERTS   |                 | 01/29/2021  |
|---------------------------|---|-----------------|---|
|                           | Electronic Signature of Registered Agent                  |                 | Date  |
| Officer/Director Detail : |   |                 |   |
| Title                     | TREASURER   | Title           | PRESIDENT   |
| Name                      | WOODS, BYRON  | Name            | HORNER, JEFFREY   |
|                           | C/O PREMIER FLORIDA PROPERTY<br>MANAGEMENT<br>PO BOX 2088 | Address         | C/O PREMIER FLORIDA PROPERTY<br>MANAGEMENT<br>PO BOX 2088 |
| City-State-Zip:           | CALLAHAN FL 32011   | City-State-Zip: | CALLAHAN FL 32011   |
| Title                     | SECRETARY   |                 |   |
| Name                      | HOLLAND , GREGORY   |                 |   |
|                           | C/O PREMIER FLORIDA PROPERTY<br>MANAGEMENT<br>PO BOX 2088 |                 |   |

City-State-Zip: CALLAHAN FL 32011

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: JEFFREY HORNER

PRESIDENT

01/29/2021 Date

Electronic Signature of Signing Officer/Director Detail

# FILED Jan 29, 2021 Secretary of State 3894300744CC