

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000011252

**Entity Name:** BELLAVIDA HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**C/O ACCESS MANAGEMENT  
215 CELEBRATION PLACE, SUITE 115  
CELEBRATION, FL 34747**Current Mailing Address:**C/O ACCESS MANAGEMENT  
215 CELEBRATION PLACE, SUITE 115  
CELEBRATION, FL 34747 US**FEI Number:** 20-4312895**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ACCESS RESIDENTIAL MANAGEMENT  
C/O ACCESS MANAGEMENT  
215 CELEBRATION PLACE, SUITE 115  
CELEBRATION, FL 34747 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:** CATHY BRAND

02/28/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PRESIDENT
Name	PANG, XIAO
Address	215 CELEBRATION PLACE, SUITE 115
City-State-Zip:	CELEBRATION FL 34747
Title	VP
Name	LOZADA, RODNEY
Address	C/O ACCESS MANAGEMENT 215 CELEBRATION PLACE, SUITE 115
City-State-Zip:	CELEBRATION FL 34747

Title	SECRETARY/TREASURER
Name	ROMERO , STEPHANIE
Address	215 CELEBRATION PLACE, SUITE 115
City-State-Zip:	CELEBRATION FL 34747
Title	MANAGER
Name	ACCESS MANAGEMENT
Address	215 CELEBRATION PLACE SUITE 115
City-State-Zip:	CELEBRATION FL 34747

*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:** ANGELA SULLIVAN

MANAGER

02/28/2022

Electronic Signature of Signing Officer/Director Detail

Date