
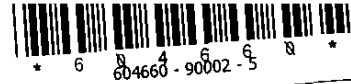


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Jul 12, 1999 8:00 am
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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # 727381 ✓ Corporation Name BELLO VISTA TOWNHOUSE ASSOCIATION, INC.		
Principal Place of Business 3251 FERNWOOD STREET GULF BREEZE FL 32561 US	Mailing Address 3251 FERNWOOD STREET GULF BREEZE FL 32561 US	



Principal Place of Business 3251 Fernwood St. Suite, Apt. #, etc.	2a. Mailing Address 3251 Fernwood St. Suite, Apt. #, etc.	3. Date Incorporated or Qualified 09/07/1973
City & State Gulf Breeze, FL	City & State Gulf Breeze, FL	4. FEI Number 59-1583589 Applied For <input type="checkbox"/> Not Applicable
Zip 32561 Country US	Zip 32561 Country USA	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
9. Name and Address of Current Registered Agent BARRETT, LUANNE S 5 CALLE TRAVIESA PENSACOLA BCH FL 32561		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
81 Name		10. Name and Address of New Registered Agent
82 Street Address (P.O. Box Number is Not Acceptable)		
83		
84 City		85 Zip Code

Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: *Luanne S. T. Barrett* DATE: **7-6-99**

OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
E EET ADDRESS -ST-ZIP	PD BARRETT, LUANNE 5 CALLE TRAVIESA PENSACOLA FL 32561 <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition Pensacola Bch, FL 32561
E EET ADDRESS -ST-ZIP	D SPEAR, BERYLE 3247 FERNWOOD STREET GULF BREEZE FL 32561 <input checked="" type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition D JIM McLendon 3253 Fernwood St. Gulf Breeze, FL 32561
E EET ADDRESS -ST-ZIP	TD COOK, JUNE L 3251 FERNWOOD ST GULF BREEZE FL 32561 <input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
E EET ADDRESS -ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
E EET ADDRESS -ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
E EET ADDRESS -ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or in an attachment with an address, with all other like empowered.

SIGNATURE: *June L. Cook* SIGNATURE REQUIRED: *Book TD* DATE: **7-6-99** PHONE: **850/932-9195**

CR2E037 (5/99)