

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733176

FILED  
Mar 16, 2010  
Secretary of State

**Entity Name:** BELLES & BEAUS SINGLES, INC.

**Current Principal Place of Business:**

MARKS ST SR. COMPLEX  
99 E. MARKS ST  
ORLANDO, FL 32803 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 523  
ORLANDO, FL 32802 US

**New Mailing Address:**

**FEI Number:** 59-1607981

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ISLER, ANN  
2527 CYPRESS TRACE CIR  
ORLANDO, FL 32825 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ISLER, ANNE  
Address: 2527 CYPRESS TRACE CR  
City-St-Zip: ORLANDO, FL 32825

Title: D  
Name: KAMM, LEA  
Address: 2800 ELIZABETH AVE  
City-St-Zip: ORLANDO, FL 32804

Title: T  
Name: COLEMAN, LORRAINE H  
Address: 1221 CARRIAGE LN  
City-St-Zip: ORLANDO, FL 32807

Title: VP  
Name: CANDELA, HARRY  
Address: 535 BROOKSIDE CIRCLE  
City-St-Zip: MAITLAND, FL 32751

Title: D  
Name: HALL, ESTON  
Address: 2590 ANACONDA TRAIL  
City-St-Zip: MAITLAND, FL 32751

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: LORRAINE H. COLEMAN

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03/16/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date