

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745720

FILED
May 09, 2009
Secretary of State

Entity Name: BELLO RIO ASSOCIATION, INC.

Current Principal Place of Business:

255 S TROPICAL TRAIL
#AA-2
MERRITT ISLAND, FL 32952 US

New Principal Place of Business:

Current Mailing Address:

255 S TROPICAL TRAIL
#AA-2
MERRITT ISLAND, FL 32952 US

New Mailing Address:

FEI Number: 59-2573491 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

VANDERNOEVEN, MARK
255 S. TROPICAL TRAIL
#AA-2
MERRITT ISLAND, FL 32952 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VANDERNOEVEN, MARK
Address: 255 S TROPICAL TRAIL, UNIT AA-2
City-St-Zip: MERRITT ISLAND, FL 32952

Title: DVP () Delete
Name: JOHNS, ROY
Address: 255 S TROPICAL TRAIL A-1
City-St-Zip: MERRITT ISLAND, FL 32952

Title: SD () Delete
Name: KROFUCH, JACK
Address: 255 S. TROPICAL TRAIL, UNIT O-1
City-St-Zip: MERRITT ISLAND, FL 32952

Title: TD () Delete
Name: TRIGWELL, STEVE
Address: 255 S. TROPICAL TRAIL, UNIT B-3
City-St-Zip: MERRITT ISLAND, FL 32952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: STEVE TRIGWELL

TD

05/09/2009

Electronic Signature of Signing Officer or Director

Date