

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jul 10, 2007  
Secretary of State**

DOCUMENT# 751191

Entity Name: BELLVIEW ATHLETIC ASSOCIATION, INC.

**Current Principal Place of Business:**

2750 LONGLEAF DR  
PENSACOLA, FL 32526

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 37014  
PENSACOLA, FL 32526 US

**New Mailing Address:**

FEI Number: 59-2151226      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:**

VINYARD, DON  
2712 EUREKA LANE  
PENSACOLA, FL 32526 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: PD ( ) Delete  
Name: VINYARD, DON  
Address: 2712 EUREKA LANE  
City-St-Zip: PENSACOLA, FL  
  
Title: T ( ) Delete  
Name: MARTIN, SHANNON  
Address: 7317 GUNTER  
City-St-Zip: PENSACOLA, FL 32526  
  
Title: S ( ) Delete  
Name: SENTRY, NAOMI  
Address: 2601 PATRICHIA  
City-St-Zip: PENSACOLA, FL 32526  
  
Title: VD ( ) Delete  
Name: MARTIN, GARY  
Address: 7317 GUNTER RD  
City-St-Zip: PENSACOLA, FL 32524

**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: DONALD VINYARD

PD

07/10/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date