2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2009
Secretary of State

DOCUMENT# 763249

Entity Name: "C" BELLES, INC.

Current Principal Place of Business:

3145 ROYALSTON AVE
FT. MYERS, FL 33916

New Principal Place of Business:

Current Mailing Address:

BARBARA HARTZ
4312 S CANAL CR
NORTH FORT MYERS, FL 33903

New Mailing Address:

FEI Number: 59-2249609 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARTZ, BARBARA W
4312 S CANAL CR
NORTH FORT MYERS, FL 33903 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: DVP ( ) Delete
Name: FESTER, SANDRA
Address: 315 NE 13TH PLACE
City-St-Zip: CAPE CORAL, FL 33909

Title: DT ( ) Delete
Name: HARTZ, BARBARA
Address: 4312 S. CANAL CIRCLE
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: DP ( ) Delete
Name: TAYLOR, LOIS
Address: 4510 N KEY DR #501
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP (X) Change ( ) Addition
Name: FOSTER, SANDRA
Address: 315 NE 13TH PLACE
City-St-Zip: CAPE CORAL, FL 33909

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

Title: DP (X) Change ( ) Addition
Name: PICCIANO, JUDY
Address: 9623 WINDSOR CLUB DRIVE
City-St-Zip: FORT MYERS, FL 33905

Title: DS ( ) Change (X) Addition
Name: TAYLOR, LOIS
Address: 4510 N. KEY DR. #501
City-St-Zip: NORTH FORT MYERS, FL 33903

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: BARBARA W. HARTZ DT 01/22/2009

Electronic Signature of Signing Officer or Director — Date