

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 763249

**FILED**  
**Jan 28, 2011**  
**Secretary of State**

**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  
Name: COPE, DOLORES  
Address: 5504 HARBOR LANE  
City-St-Zip: NORTH FORT MYERS, FL 33917

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

Title: DP  
Name: TAYLOR, LOIS  
Address: 4510 N. KEY DR.  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: DS  
Name: HIGHFILL, SUSAN  
Address: 2206 DEL MAR DRIVE  
City-St-Zip: NORTH FORT MYERS, FL 33903

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: BARBARA W. HARTZ

TREA

01/28/2011

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

\_\_\_\_\_  
Date