

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000006184

FILED
Apr 22, 2008
Secretary of State

Entity Name: BELLE DEMEURE PROPERTIES LTD., INC.

Current Principal Place of Business:

5625 BAROQUE DR
HOLIDAY, FL 34690

New Principal Place of Business:

Current Mailing Address:

2352 TORREY PINES RD
UNIT 8
LA JOLLA, CA 92037

New Mailing Address:

FEI Number: 20-0158928

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IRISH, RYAN E
5625 BAROQUE DR
HOLIDAY, FL 34690 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CV () Delete
Name: IRISH, EDWARD W JR
Address: 1407 33RD STREET, NW
City-St-Zip: WASHINGTON, DC 20007

Title: VCS () Delete
Name: IRISH, KAREN
Address: 1407 33RD STREET, NW
City-St-Zip: WASHINGTON, DC 20007

Title: DP () Delete
Name: IRISH, STEVEN R
Address: 2352 TORREY PINES RD UNIT 8
City-St-Zip: LA JOLLA, CA 92037

Title: VP () Delete
Name: IRISH, RYAN
Address: 5625 BAROQUE DR
City-St-Zip: HOLIDAY, CA 34690

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN IRISH

DP

04/22/2008

Electronic Signature of Signing Officer or Director

Date