

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000005723

FILED
Mar 30, 2005
Secretary of State

Entity Name: BELLEMEAD MARINA DEL REY CORP. II

Current Principal Place of Business:

C/O JOANNE F MEISLER
85 LIVINGSTON AVENUE
ROSELAND, NJ 07068

New Principal Place of Business:

C/O JOANNE F MEISLER
BELLEMEAD - 85 LIVINGSTON AVENUE
ROSELAND, NJ 07068

Current Mailing Address:

C/O JOANNE F MEISLER
85 LIVINGSTON AVENUE
ROSELAND, NJ 07068

New Mailing Address:

C/O JOANNE F MEISLER
BELLEMEAD - 85 LIVINGSTON AVENUE
ROSELAND, NJ 07068

FEI Number: 52-2078042

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: P () Delete
Name: MONTGOMERY, GLENN A
Address: 85 LIVINGSTON AVENUE
City-St-Zip: ROSELAND, NJ 07068

Title: SVPT () Delete
Name: GROSSEIBL, ERIC H
Address: 85 LIVINGSTON AVENUE
City-St-Zip: ROSELAND, NJ 07068

Title: SVPS () Delete
Name: MEISLER, JOANNE F
Address: 85 LIVINGSTON AVENUE
City-St-Zip: ROSELAND, NJ 07068

Title: VP (X) Delete
Name: SLOOTMAKER, ADRIAN P
Address: 85 LIVINGSTON AVENUE
City-St-Zip: ROSELAND, NJ 07068

Title: VPAS () Delete
Name: UANINO, ANTHONY
Address: 85 LIVINGSTON AVENUE
City-St-Zip: ROSELAND, NJ 07068

Title: VPT (X) Delete
Name: MINK, WILLIAM
Address: 85 LIVINGSTON AVENUE
City-St-Zip: ROSELAND, NJ 07068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SVPT (X) Change () Addition
Name: SLOOTMAKER, ADRIAN P
Address: 85 LIVINGSTON AVENUE
City-St-Zip: ROSELAND, NJ 07068

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 for the exemption stated in Section 119.07(3)(i), 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: JOANNE F. MEISLER

SECR

03/30/2005

Electronic Signature of Signing Officer or Director

Date