

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 06, 2006 8:00 am
Secretary of State

04-06-2006 90019 035 ****61.25

DOCUMENT # N00044

1. Entity Name

**THE VILLAS OF BELLEVIEW HOMEOWNERS
ASSOCIATION, INC.**



Principal Place of Business

Mailing Address

5000 SE 110TH ST.
P.O. BOX 727
BELLEVIEW FL 34421-0727
US

P.O. BOX 727
BELLEVIEW FL 34421-0727
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2721564

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GOWIE, BARBARA L
5036 SE 108 ST
BELLEVIEW FL 34420

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☐ Delete
NAME FRENCH, KAREN
STREET ADDRESS 5033 SE 109 PL
CITY-ST-ZIP BELLEVIEW FL 34420

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MD ☒ Delete
NAME GRAPPERHAUS, GERALD
STREET ADDRESS 5035 SE 108 PL
CITY-ST-ZIP BELLEVIEW FL 34420

TITLE MAINTENANCE DIRECTOR ☐ Change ☒ Addition
NAME EDWARD BARRY
STREET ADDRESS 10749 SE 51ST AVE
CITY-ST-ZIP BELLEVIEW, FL 34420

TITLE T ☐ Delete
NAME GOWIE, BARBARA
STREET ADDRESS 5036 SE 108 ST
CITY-ST-ZIP BELLEVIEW FL 34420

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MD ☐ Delete
NAME KIRKHAM, HELEN
STREET ADDRESS 5029 SE 107 PL
CITY-ST-ZIP BELLEVIEW FL 34420

TITLE SECRETARY ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☐ Delete
NAME RUTHVEN, WILLIAM
STREET ADDRESS 10836 SE 50TH AVE
CITY-ST-ZIP BELLEVIEW FL 34420

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☒ Delete
NAME HARRINGTON, RITA
STREET ADDRESS 5025 SE 107 PLACE
CITY-ST-ZIP BELLEVIEW FL 34420

TITLE MAINTENANCE DIRECTOR ☐ Change ☒ Addition
NAME JAMES HARDEMAN
STREET ADDRESS 5025 SE 103TH ST
CITY-ST-ZIP BELLEVIEW, FL 34420

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Barbara L Gowie **TREASURER** 4/1/06 (352) 245-6483