## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000007169

Entity Name: BELLEVIEW BUSINESS LEADERS, INC.

FILED Apr 03, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

7719 SW 102ND LOOP OCALA, FL 34474

Current Mailing Address: New Mailing Address:

7719 SW 102ND LOOP PO BOX 787 OCALA, FL 34474 PO CALA, FL 34478

FEI Number: 59-3752942 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KILLIAN, PATRICK
7719 SW 102ND LOOP
4215 SE 59TH STREET
OCALA, FL 34474 US
OCALA, FL 34480 US

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: HOWARD MOON 04/03/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 DP () Delete
 Title:
 DP (X) Change () Addition

 Name:
 YODER, PATRICIA
 Name:
 RAPPEL, PAUL

 Address:
 P O BOX 291
 Address:
 7048 MIDWAY TERRACE #101

 City-St-Zip:
 LADY LAKE, FL 32158
 City-St-Zip:
 OCALA, FL 34472

Title: DV ( ) Delete Title: TD (X) Change ( ) Addition Name: KILLIAN, PATRICK Name: HOWARD, MOON

Address: 7719 SW 102ND LOOP Address: 4215 SE 59TH STREET

 Address:
 7719 SW 102ND LOOP
 Address:
 4215 SE 59TH STREET

 City-St-Zip:
 OCALA, FL 34474
 City-St-Zip:
 OCALA, FL 34480

Title: D ( ) Delete Title: S (X) Change ( ) Addition Name: BAYLIS, ANN Name: MOSLEY, PAM

 Address:
 10815 SE 55TH ST
 Address:
 2922 NE 23RD ST

 City-St-Zip:
 BELLEVIEW, FL 34420
 City-St-Zip:
 OCALA, FL 34470

Title: TD () Delete Title: D (X) Change () Addition

 Name:
 WILSON, LINDA
 Name:
 MOSELY, DONNA

 Address:
 PO BOX 1629
 Address:
 2292 NE 23RD STREET

 City-St-Zip:
 BELLEVIEW, FL 34421
 City-St-Zip:
 OCALA, FL 34470

 Name:
 MOSLEY, PAMELA
 Name:

 Address:
 2922 NE 23 STREET
 Address:

 City-St-Zip:
 OCALA, FL 34470
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 GRUBER, DEBORAH
 Name:

 Address:
 3080 SE 159TH LANE RD
 Address:

 City-St-Zip:
 SUMMERFIELD, FL 34491
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: HOWARD MOON TD 04/03/2006

Electronic Signature of Signing Officer or Director

Date