2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008503

FILED Mar 09, 2009 Secretary of State

Entity Name: BELLAGIO AT SUN CITY CENTER FT. MYERS PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business: 9411 CYPRESS LAKE DRIVE STE 2 FT MYERS, FL 33919 Current Mailing Address: 9411 CYPRESS LAKE DRIVE 9411 CYPRESS LAKE DRIVE C/O SCHOO MANAGEME C/O SCHOO MANAGEME C/O SCHOO MANAGEME	ENT DR
STE 2 FT MYERS, FL 33919 Current Mailing Address: 9411-2 CYPRESS LAKE D FT MYERS, FL 33919 New Mailing Address:	OR ENT
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9411 CYPRESS LAKE DRIVE C/O SCHOO MANAGEME	
STE 2 9411-2 CYPRESS LAKE [FT MYERS, FL 33919 FT MYERS, FL 33919	
FEI Number: 59-3759313 FEI Number Applied For () FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of No	ew Registered Agent:
BOB GELLES C/O SCHOO MANAGEMENT 9411 CYPRESS LAKE DRIVE STE 2 FORT MYERS, FL 33919 US	
The above named entity submits this statement for the purpose of changing its registered of in the State of Florida.	ice or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered Agent	Date
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES 1	O OFFICERS AND DIRECTORS:
Title: P () Delete Title: () One Name: SHEVACH, ALLEN Name: Address: 10531 BELLAGIO DR. Address: City-St-Zip: FORT MYERS, FL 33913 City-St-Zip:	Change ()Addition
Title: V () Delete Title: V (X) Name: HOBBS, LARRY Name: FREESE, HERBI Address: 9913 BELLAGIO CT Address: 10524 BELLAGI City-St-Zip: FORT MYERS, FL 33913 City-St-Zip: FORT MYERS, FL	0 СТ
Title: ST () Delete Title: () One Name: GUY, WILLIAM Name: Address: 10501 BELLAGIO CT Address: City-St-Zip: FORT MYERS, FL 33913 City-St-Zip:	Change ()Addition
Title: D () Delete Title: D (X) Name: LIPSCHUTZ, ROBERT Name: ALTIERI, FRANK Address: 10516 BELLAGIO DR. Address: 10528 BELLAGIO City-St-Zip: FORT MYERS, FL 33913 City-St-Zip: FORT MYERS, F	D DR.
Title: D () Delete Title: () Ones Name: LABODA, GERALD Name: Address: 9904 BELLAGIO CT Address: City-St-Zip: FORT MYERS, FL 33913 City-St-Zip:	Change ()Addition

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

SIGNATURE: ROBERT E GELLES CAM 03/09/2009