

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2005 8:00 am
Secretary of State

04-04-2005 90062 019 ****61.25

DOCUMENT # N02000002925					
1. Entity Name BELLE-CHASE PROPERTY OWNERS' ASSOCIATION, INC.					
Principal Place of Business 1519 CHEVY CHASE DR. SUN CITY CENTER, FL 33573			Mailing Address 1519 CHEVY CHASE DR. SUN CITY CENTER, FL 33573		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2287890	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HINES, JAMES P JR. 315 S. HYDE PARK AVE. TAMPA, FL 33606			7. Name and Address of New Registered Agent 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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 PD NAME TODD, DONALD A STREET ADDRESS 1519 CHEVY CHASE DR. CITY-ST-ZIP SUN CITY CENTER, FL 33573	<input type="checkbox"/> Delete		TITLE PD NAME FELIX N. SALZANO STREET ADDRESS 1502 BELLE GLADE AVE. CITY-ST-ZIP S.C.C., FL. 33573	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE VD NAME SALZANO, FELIX N STREET ADDRESS 1502 BELLE GLADE AVE. CITY-ST-ZIP SUN CITY CENTER, FL 33573	<input type="checkbox"/> Delete		TITLE VD NAME DONALD A. TODD STREET ADDRESS 1519 CHEVY CHASE CITY-ST-ZIP SUN CITY CTR., FL. 33573	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE SD NAME TOVEY, MARY J STREET ADDRESS 1527 CHEVY CHASE DR. CITY-ST-ZIP SUN CITY CENTER, FL 33573	<input type="checkbox"/> Delete		TITLE SD NAME MARCELLA SCHMALTZ STREET ADDRESS 1517 CHEVY CHASE CITY-ST-ZIP SUN CITY CTR., FL. 33573	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE TD NAME TOVEY, LOUIS T STREET ADDRESS 1527 CHEVY CHASE DR. CITY-ST-ZIP SUN CITY CENTER, FL 33573	<input type="checkbox"/> Delete		TITLE D. NAME GERALD BRAAFHART STREET ADDRESS 1516 BELLE GLADE CITY-ST-ZIP S.C.C. FL. 33573	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE D NAME GARLAND, JOHN STREET ADDRESS 1515 CHEVY CHASE DR CITY-ST-ZIP SUN CITY CENTER, FL 33573	<input checked="" type="checkbox"/> Delete		TITLE D. NAME GERALD BRAAFHART STREET ADDRESS 1516 BELLE GLADE CITY-ST-ZIP S.C.C. FL. 33573	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE PD NAME TODD, DONALD A STREET ADDRESS 1519 CHEVY CHASE DR. CITY-ST-ZIP SUN CITY CENTER, FL 33573	<input type="checkbox"/> Delete		TITLE PD NAME FELIX N. SALZANO STREET ADDRESS 1502 BELLE GLADE AVE. CITY-ST-ZIP S.C.C., FL. 33573	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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: <i>Lama J. Tovey</i> March 28, 2005 813-634-7799					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					