

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 03, 2006 8:00 am
Secretary of State

03-03-2006 90110 043 ****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

1502 BELLE GLADE AVE

Suite, Apt. #, etc.

3. Mailing Address

1502 BELLE GLADE AVE

Suite, Apt. #, etc.

City & State

SUN CITY CENTER, FL.

Zip
33573

Country
HILLSBOROUGH

City & State

SUN CITY CENTER, FL

Zip
33573

Country
HILLSBOROUGH

02272006

Chg-NP

CR2E037 (11/05)

4. FEI Number

59-2287890

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$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**

Name

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

City

FL

Zip Code

7. Name and Address of New Registered Agent

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

**Filing 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
TODD, DONALD A
1519 CHEVY CHASE DR.
SUN CITY CENTER, FL 33573** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
SALZANO, FELIX N
1502 BELLE GLADE AVE.
SUN CITY CENTER, FL 33573** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
TOVEY, MARY J
1527 CHEVY CHASE DR.
SUN CITY CENTER, FL 33573** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
TOVEY, LOUIS T
1527 CHEVY CHASE DR.
SUN CITY CENTER, FL 33573** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SCHMALTE MARCELLA
1517 CHEVY CHASE
SUN CITY CENTER, FL 33573** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BRAAFHART, GERALD
1516 BELLE GLADE
SUN CITY CENTER, FL 33573** ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Louis T. Tovey* **Louis T. Tovey** Treasurer 2-28-06 813-634-7399

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #