

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005847

FILED
May 01, 2007
Secretary of State

Entity Name: BELLE HARBOR OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

501 MANDALAY AVE.
CLEARWATER, FL 33767

New Principal Place of Business:

Current Mailing Address:

501 MANDALAY AVE.
CLEARWATER, FL 33767

New Mailing Address:

FEI Number: 14-1874295 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

RESOURCE PROPERTY MANAGEMENT
7300 PARK STREET
SEMINOLE, FL 33777 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROBULAK, KENNETH PD
Address: 521 MANDALAY AVENUE # 302
City-St-Zip: CLEARWATER, FL 33767 US

Title: VPD () Delete
Name: ALTNER, MARTIN VPD
Address: 501 MANDALAY AVENUE # 507
City-St-Zip: CLEARWATER, FL 33767 US

Title: STD () Delete
Name: MESTAS, DONALD STD
Address: 521 MANDALAY AVENUE # 1108
City-St-Zip: CLEARWATER, FL 33767 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DIR () Change (X) Addition
Name: WARSTLER, JOANNE
Address: 521 MANDALAY AVE # 905
City-St-Zip: CLEARWATER, FL 33767

Title: DIR () Change (X) Addition
Name: WAZIO, RAFEL
Address: 1180 GULF BLVD. #406
City-St-Zip: CLEARWATER, FL 33767

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: KEN ROBULAK

P

05/01/2007

Electronic Signature of Signing Officer or Director

Date