

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008244

FILED
Apr 19, 2007
Secretary of State

Entity Name: BELLECHASE MASTER HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

8009 S. ORANGE AVE.
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

8009 S. ORANGE AVE.
ORLANDO, FL 32809

New Mailing Address:

FEI Number: 58-2676665 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FURLOW, REBECCA
C/O LELAND MANAGEMENT INC.
8009 S. ORANGE AVE.
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

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: DP () Delete
Name: BOYD, ROY T III
Address: 1700 SE 17TH STREET SUITE 300
City-St-Zip: OCALA, FL 34471

Title: DST () Delete
Name: YOUNG, LARRY
Address: 1700 SE 17TH STREET SUITE 300
City-St-Zip: OCALA, FL 34471

Title: D () Delete
Name: HAINES, TIM D
Address: 125 NE 1ST AVENUE SUITE 1
City-St-Zip: OCALA, FL 34470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BOYD, ROY T III
Address: 1720 SE 16TH AVENUE, BLDG 200
City-St-Zip: OCALA, FL 34471

Title: DST (X) Change () Addition
Name: YOUNG, LARRY
Address: 1720 SE 16TH AVENUE, BLDG 200
City-St-Zip: OCALA, FL 34471

Title: () Change () Addition
Name:
Address:
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: ROY T. BOYD III

DP

04/19/2007

Electronic Signature of Signing Officer or Director

_____ Date