

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 06, 1999 8:00 am
Secretary of State

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DOCUMENT # N02591

1. Corporation Name

BELLE GROVES MOBILE HOME OWNERS ASSOCIATION, INC

Principal Place of Business

Mailing Address

624301 BLVD E
G-6/BELLE GROVE VILL.
BRADENTON FL 34203

624301 BLVD E
G-6/BELLE GROVE VILL.
BRADENTON FL 34203



2. Principal Place of Business

2a. Mailing Address

21 **624 301 BLVD E**26 **624 301 BLVD E**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **E-4 BELLE GROVE VILL**27 **E-4 BELLE GROVE VILL**

City & State

City & State

23 **BRADENTON FL 34203**28 **BRADENTON FL 34203**

Zip

Country

Zip

Country

24 **34203**25 **MANATEE**29 **34203**30 **MANATEE**

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

04/17/1984

4. FEI Number

59-2491588

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐**\$5.00** May Be
Added to Fees

10. Name and Address of New Registered Agent

FURLONG, THOMAS

624 201 BLVD E, A-1/BELLE GROVE VILL.
BRADENTON FL 34203

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

P
A KIETH EMENHISER
624 US 301 BLVD E
BRADENTON FL

1.1 TITLE ☒ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

P
HERBERT OGLESBEE
624 US 301 BLVD E
BRADENTON FL 34203

TITLE ☐ DELETE

VP
KENNY ANDERSON
624 US 301 BLVD E
BRADENTON FL

2.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

VP
KIETH EMENHISER
624 US 301 BLVD E
BRADENTON FL

TITLE ☐ DELETE

S
LINDA BENDER
624 US 301 BLVD E.
BRADENTON FL

3.1 TITLE ☒ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

S + T
RUTH OGLESBEE
624 US 301 BLVD E
BRADENTON FL

TITLE ☐ DELETE

T
RUTH OGLESBEE
624 US 301 BLVD E
BRADENTON FL

4.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

D
JACK OGLESBEE
624 US 301 BLVD E
BRADENTON FL

TITLE ☐ DELETE

D
WEAVER, JOHN
624 US 301 BLVD E
BRADENTON FL

5.1 TITLE ☒ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

D
EVERIL MARK
624 US 301 BLVD E
BRADENTON FL

TITLE ☐ DELETE

D
OGLESBEE, JACK
624 US 301 BLVD E
BRADENTON FL

6.1 TITLE ☒ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

D
JAMES HUBBARD
624 US 301 BLVD E
BRADENTON FL

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **HERBERT OGLESBEE** *Herbert Oglesbee* **2/16/99 753-0036**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)