


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2006 08:00 AM
Secretary of State

DOCUMENT # N03000008962

1. Entity Name
BELLEAIR HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business Mailing Address

5514 PARK BLVD **5514 PARK BLVD**
PINELLAS PARK, FL 33781 **PINELLAS PARK, FL 33781**

DO NOT WRITE IN THIS SPACE



02062006 No Chg-NP CR2E037 (11/05)

4. FEI Number Applied For
20-0329639 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ENGLANDER, LEONARD S
721 1ST AVE. NORTH
ST. PETERSBURG, FL 33701

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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 _____ (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

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	BRODERICK, ROGER B
STREET ADDRESS	5514 PARK BLVD.
CITY-ST-ZIP	PINELLAS PARK, FL 33781
TITLE	D
NAME	BRODERICK, TONIA M
STREET ADDRESS	5514 PARK BLVD.
CITY-ST-ZIP	PINELLAS PARK, FL 33781
TITLE	D
NAME	BRODERICK, ROBERT B
STREET ADDRESS	5514 PARK BLVD.
CITY-ST-ZIP	PINELLAS PARK, FL 33781
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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UCR1000480902
 04/11/06-80011-006 61.25

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:  2/13/06 727-544-1403

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #