2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009546

Entity Name: BELLES CHASE OWNERS ASSOCIATION, INC.

FILED Jan 28, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

18 A STREET 3 FIRST STREET

ST. AUGUSTINE, FL 32080 ST. AUGUSTINE, FL 32080

Current Mailing Address: New Mailing Address:

18 A STREET 3 FIRST STREET

ST. AUGUSTINE, FL 32080 ST. AUGUSTINE, FL 32080

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BRALY, MATTHEW
18 A STREET

BRALY, MATTHEW
3 FIRST STREET

ST. AUGUSTINE, FL 32080 US ST. AUGUSTINE, FL 32080 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: 01/28/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PD (X) Change () Addition

 Name:
 BRALY, MATTHEW C
 Name:
 BRALY, MATTHEW C

 Address:
 18 A STREET
 Address:
 3 FIRST STREET

City-St-Zip: ST. AUGUSTINE, FL 32080 City-St-Zip: ST. AUGUSTINE, FL 32080

Title: VP () Delete Title: VP (X) Change () Addition Name: BRALY, LAURA M Name: BRALY, LAURA M

Address: 18 A STREET Address: 3 FIRST STREET

 City-St-Zip:
 ST. AUGUSTINE, FL 32080
 City-St-Zip:
 ST. AUGUSTINE, FL 32080

Title: STD () Delete Title: STD (X) Change () Addition Name: BRALY, ISABELLE P Name: BRALY, ISABELLE P

Address: 18 A STREET Address: 3 FIRST STREET

City-St-Zip: ST. AUGUSTINE, FL 32080 City-St-Zip: ST. AUGUSTINE, FL 32080

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: MATTHEW C BRALY PRES 01/28/2007