2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03121

FILED Mar 02, 2009 Secretary of State

Entity Name: BELLE MER VILLAS HOMEOWNERS ASSOCIATION, INC.

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

15527 ROYAL FERN LANE N. 15529 ROYAL FERN LANE N. NAPLES, FL 34110 US NAPLES, FL 34110 US

Current Mailing Address: New Mailing Address:

C/O FINANCIAL MANAGEMENT SERVICES P.O. BOX 11496 NAPLES, FL 341011496

FEI Number: 65-0253929 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DACY, WES

15503 ROYAL FERN LN N
NAPLES, FL 34110 US

STAMM, TONI
15529 ROYAL FERN LN N
NAPLES, FL 34110 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: TONI STAMM 03/02/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: DACY, WES Name: STAMM, TONI

Address: 15503 ROYAL FERN LANE N. Address: 15529 ROYAL FERN LANE N. City-St-Zip: NAPLES, FL 34110 US City-St-Zip: NAPLES, FL 34110 US

Title: ST () Delete Title: ST (X) Change () Addition Name: DAMANDL, JERRY Name: DAMANDL, JERRY

Address: 15553 ROYAL FERN LANE NORTH Address: 15557 ROYAL FERN LANE NORTH

City-St-Zip: NAPLES, FL 34110 US City-St-Zip: NAPLES, FL 34110 US

Title: VD () Delete Title: VD (X) Change () Addition

 Name:
 STAMM, TONI
 Name:
 COROLLO, TOM

 Address:
 15529 ROYAL FERN LN N
 Address:
 15525 ROYAL FERN LN N

 City-St-Zip:
 NAPLES, FL 34112 US
 City-St-Zip:
 NAPLES, FL 34112 US

Title: D (X) Delete Title: () Change () Addition

 Name:
 COROLLO, TOM
 Name:

 Address:
 15525 ROYAL FERN LN N
 Address:

 City-St-Zip:
 NAPLES, FL 34110 US
 City-St-Zip:

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: JERRY L. DAMANDL ST 03/02/2009