

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003534

FILED  
Mar 30, 2010  
Secretary of State

**Entity Name:** BELLE CHASE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

STERLING MANAGEMENT SERVICES  
2870 SCHERER DRIVE N. STE. 100  
SAINT PETERSBURG, FL 33716

**New Principal Place of Business:**

THE CONTINENTAL GROUP  
2870 SCHERER DRIVE N. STE. 100  
SAINT PETERSBURG, FL 33716

**Current Mailing Address:**

STERLING MANAGEMENT SERVICES  
2870 SCHERER DRIVE N. STE. 100  
SAINT PETERSBURG, FL 33716

**New Mailing Address:**

THE CONTINENTAL GROUP  
2870 SCHERER DRIVE N. STE. 100  
SAINT PETERSBURG, FL 33716

**FEI Number:** 20-2824538

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COTTERILL, RON  
1010 N. FLORIDA AVE  
1010 N. FLORIDA AVE  
TAMPA, FL 33602 US

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

COTTERILL, RON  
1010 N. FLORIDA AVE  
TAMPA, FL 33602 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:

03/30/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: BEAVER, STEPHEN  
Address: 1118 NAPOLEAN WAY  
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: D  
Name: SRINIVASA, MALLADI  
Address: 1151 NASHVILLE DRIVE  
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: D  
Name: RITZENTHALER, ROBERT  
Address: 1101 NAPOLEAN WAY  
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: T  
Name: STIVLER, DANIEL  
Address: 1135 NAPOLEAN WAY  
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: S  
Name: LEMANSKI, DONNA  
Address: 1024 NAPOLEAN WAY  
City-St-Zip: WESLEY CHAPEL, FL 33543

I hereby 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 all other like empowered.

SIGNATURE: GAIL KNIGHT

AGNT

03/30/2010

Electronic Signature of Signing Officer or Director

Date