

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 15, 2006
Secretary of State**

DOCUMENT# N04000008332

Entity Name: THE BELLAGIO HARBOR VILLAGE MASTER ASSOCIATION, INC.

Current Principal Place of Business:

480 BLACKBURN PT RD
OSPREY, FL 34229

New Principal Place of Business:

Current Mailing Address:

480 BLACKBURN PT RD
OSPREY, FL 34229

New Mailing Address:

FEI Number: 20-2681564 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VOIGT, STEPHEN F JR.
480 BLACKBURN PT RD
OSPREY, FL 34229 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: NADOLSKI, LEONARD
Address: 480 BLACKBURN PT RD
City-St-Zip: OSPREY, FL 34229

Title: D () Delete
Name: LEFEVRE, TOM
Address: 480 BLACKBURN PT RD
City-St-Zip: OSPREY, FL 34229

Title: D () Delete
Name: HAMBORSKY, DOUG
Address: 480 BLACKBURN PT RD
City-St-Zip: OSPREY, FL 34229

Title: D () Delete
Name: VOIGT, STEPHEN F SR.
Address: 480 BLACKBURN PT RD
City-St-Zip: OSPREY, FL 34229

Title: D () Delete
Name: VOIGT, STEPHEN F JR.
Address: 480 BLACKBURN PT RD
City-St-Zip: OSPREY, FL 34229

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LEONARD NADOLSKI

PTD

04/15/2006

Electronic Signature of Signing Officer or Director

Date