

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008333

FILED
Apr 23, 2009
Secretary of State

Entity Name: THE VILLAS AT BELLAGIO HARBOR VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

14001 BELLAGIO WAY
OSPREY, FL 34229

New Principal Place of Business:

Current Mailing Address:

14001 BELLAGIO WAY
OSPREY, FL 34229

New Mailing Address:

FEI Number: 20-2681714

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RYAN, DAN
14041 BELLAGIO WAY #413
OSPREY, FL 34229 US

Name and Address of New Registered Agent:

COASTAL LIVING REAL ESTATE & PROP. MGMT
14001 BELLAGIO WAY
OSPREY, FL 34229 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: KAREN WILLIAMS

04/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: RYAN, DAN
Address: 14041 BELLAGIO WAY #413
City-St-Zip: OSPREY, FL 34229

Title: TRES () Delete
Name: WOOD, BILL
Address: 14021 BELLAGIO WAY #206
City-St-Zip: OSPREY, FL 34229

Title: VP () Delete
Name: GELDER, RICH
Address: 14021 BELLAGIO WAY #403
City-St-Zip: OSPREY, FL 34229

Title: SEC () Delete
Name: LUDWIG, DALE
Address: 14021 BELLAGIO WAY #209
City-St-Zip: OSPREY, FL 34229

Title: DIR () Delete
Name: BABEL, DAVE
Address: 14001 BELLAGIO WAY
City-St-Zip: OSPREY, FL 34229

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TRES (X) Change () Addition
Name: JOELSON, RAY
Address: 14021 BELLAGIO WAY #402
City-St-Zip: OSPREY, FL 34229

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

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

Title: DIR (X) Change () Addition
Name: LEFEVRE, TOM
Address: 14001 BELLAGIO WAY
City-St-Zip: OSPREY, FL 34229

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: DAN RYAN

PRES

04/23/2009

Electronic Signature of Signing Officer or Director

Date