## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000009459

FILED Apr 16, 2009 Secretary of State

Entity Name: THE VILLAGE AT BELLECHASE HOMEOWNERS' ASSOCIATION, INC.

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

1720 SE 16TH AVE. #200 1720 SE 16TH AVE. OCALA, FL 34471 BUILDING #200

OCALA, FL 34471

Current Mailing Address: New Mailing Address:

1720 SE 16TH AVE. #200 1720 SE 16TH AVE. OCALA, FL 34471 BUILDING #200 OCALA, FL 34471

FEI Number: 77-0631213 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:

YOUNG, LARRY
1720 SE 16TH AVE
BLDG 200
OCALA, FL 34471 US
BOYD, ROY T III
1720 SE 16TH AVE
BLDG 200
OCALA, FL 34471 US
OCALA, FL 34471 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: ROY T. BOYD, III 04/16/2009

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: BOYD, ROY T III Name: BOYD, ROY T III

Address: 1700 SE 17TH STREET STE 300 Address: 1720 SE 16TH AVENUE, BUILDING #200

City-St-Zip: OCALA, FL 34471 City-St-Zip: OCALA, FL 34471

Title: DST ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 YOUNG, LARRY
 Name:

 Address:
 1720 SE 16TH AVE BLDG 200
 Address:

 City-St-Zip:
 OCALA, FL 34471
 City-St-Zip:

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

 Name:
 HAINES, TIM Y D
 Name:

 Address:
 125 NE 1ST AVE. SUITE 1
 Address:

 City-St-Zip:
 OCALA, FL 34471
 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: ROY T. BOYD, III DP 04/16/2009