2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009867

SIGNATURE: CHRISTOPHER BABCOCK

Electronic Signature of Signing Officer or Director

FILED Jul 06, 2006 Secretary of State

Entity Name: STATE ROAD 52 BELLAMY PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place of Business:	
5709 TIDALWAVE DR. NEW PORT RICHEY, FL 34652		PO BOX 7001 WESLEY CHAPEL, FL 33543	
Current Mailing Address:		New Mailing Address:	
5709 TIDALWAVE DR. NEW PORT RICHEY, FL 34652		PO BOX 7001 WESLEY CHAPEL, FL 33543	
FEI Number: 20-2471977 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent:			
	CLYDE LWAVE DR. TRICHEY, FL 34652 US		
The above in the State	named entity submits this statement for the purpose of Florida.	of changing it	s registered office or registered agent, or both,
SIGNATURE:			
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Delete WILLETT, R. MARK 1927 PASSERO AVE. LUTZ, FL 33559	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	VD () Delete CASH, JEFFREY S 5709 TIDALWAVE DR. NEW PORT RICHEY, FL 34652	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	S () Delete KLEINATLAND, HOWARD III 5709 TIDALWAVE DR. NEW PORT RICHEY, FL 34652	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	T () Delete WILD, JOHNNY 5709 TIDALWAVE DR. NEW PORT RICHEY, FL 34652	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	D () Delete GUILFORD, LARRY G 5709 TIDALWAVE DR. NEW PORT RICHEY, FL 34652	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	D () Delete BABCOCK, C.I. III 2764 SUNSET POINT RD., SUITE 200 CLEARWATER, FL 33759	Title: Name: Address: City-St-Zip:	D (X) Change () Addition BABCOCK, CHRISTOPHER 2764 SUNSET POINT RD., SUITE 200 CLEARWATER, FL 33759
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.			

D

07/06/2006

Date