

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011000

FILED
Jan 06, 2009
Secretary of State

Entity Name: BELLEZZA AND AVALLONE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2220 JAND C. BLVD.
SUITE 1
NAPLES, FL 34109 US

New Principal Place of Business:

2220 J AND C BLVD
SUITE 1
NAPLES, FL 34109 US

Current Mailing Address:

2220 JAND C BLVD
SUITE 1
NAPLES, FL 34109 US

New Mailing Address:

2220 J AND C BLVD
SUITE 1
NAPLES, FL 34109 US

FEI Number: 20-1932618

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C & L MANAGEMENT SERVICES
2220 JAND C BLVD
SUITE 1
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

C & L MANAGEMENT SERVICES
2220 J AND C BLVD
SUITE 1
NAPLES, FL 34109 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: ROBERT P. TITUS

01/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: LAFOLLETTE, KAREN L
Address: 8200 HEALTH CENTER BLVD, STE 101
City-St-Zip: BONITA SPRINGS, FL 34134

Title: P () Delete
Name: JENKINS, FRANK R
Address: 8200 HEALTH CENTER BLVD - STE 101
City-St-Zip: BONITA SPRINGS, FL 34135

Title: VP () Delete
Name: COLTON, JERRY E
Address: 8200 HEALTH CENTER BLVD, STE 101
City-St-Zip: BONITA SPRINGS, FL 34135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: JENKINS, FRANK R
Address: 8200 HEALTH CENTER BLVD, STE 101
City-St-Zip: BONITA SPRINGS, FL 34135

Title: () Change () Addition
Name:
Address:
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: FRANK JENKINS, JR.

P

01/06/2009

Electronic Signature of Signing Officer or Director

Date