

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011558

FILED  
Jan 31, 2009  
Secretary of State

Entity Name: BELLARIA HOMEOWNERS ASSOCIATION, INC.

## Current Principal Place of Business:

1050 S LAKE SYBELIA DR  
MAITLAND, FL 32751

## New Principal Place of Business:

## Current Mailing Address:

1050 S LAKE SYBELIA DR  
MAITLAND, FL 32751

## New Mailing Address:

FEI Number: 20-2736234

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SOUTH, J TODD  
2699 LEE ROAD  
WINTER PARK, FL 32789 US

## Name and Address of New Registered Agent:

SOUTH, J TODD  
1000 LEGIONS PLACE, SUITE 1200  
ORLANDO, FL 32801 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: J TODD SOUTH (W/PERMISSION 1-27-2008)

01/31/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: CRONE, MARK A  
Address: 1050 S LAKE SYBELIA DR  
City-St-Zip: MAITLAND, FL 32751

Title: DS ( ) Delete  
Name: LIGHTSEY, THOMAS JR  
Address: 9750 BOHART CT  
City-St-Zip: ORLANDO, FL 32836

Title: DV ( ) Delete  
Name: WATKINS, KENNETH F  
Address: 294 S COCONUT PALM BLVD  
City-St-Zip: TAVERNIER, FL 33070

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVT (X) Change ( ) Addition  
Name: CRONE, MARK A  
Address: 1050 S LAKE SYBELIA DR  
City-St-Zip: MAITLAND, FL 32751

Title: DP (X) Change ( ) Addition  
Name: LIGHTSEY, THOMAS JR  
Address: 9750 BOHART CT  
City-St-Zip: ORLANDO, FL 32836

Title: D (X) Change ( ) Addition  
Name: WATKINS, KENNETH F  
Address: 294 S COCONUT PALM BLVD  
City-St-Zip: TAVERNIER, FL 33070

Title: D ( ) Change (X) Addition  
Name: JONES, RIAL  
Address: 833 N MAGNOLIA AVE  
City-St-Zip: ORLANDO, FL 32803

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: MARK A CRONE

DVT

01/31/2009

Electronic Signature of Signing Officer or Director

Date