

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011883

FILED
Apr 29, 2005
Secretary of State

Entity Name: BELLA VITA HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

218 E BEARS AVE PMB 316
TAMPA, FL 33613

New Principal Place of Business:

Current Mailing Address:

218 E BEARS AVE PMB 316
TAMPA, FL 33613

New Mailing Address:

FEI Number: 14-1856718

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOOVER, VIN
218 E BEARS AVE
TAMPA, FL 33613 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PEPE, PATRIC J
Address: 3433 HEARDS FERRY DR
City-St-Zip: TAMPA, FL 33618

Title: D () Delete
Name: HOOVER, VIN
Address: 218 E BEARS AVE PMB 316
City-St-Zip: TAMPA, FL 33613

Title: D () Delete
Name: HOLLISTER, MARK A
Address: 10150 HIGHLAND MANOR DR STE 100
City-St-Zip: TAMPA, FL 33610

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: VIN HOOVER

D

04/29/2005

Electronic Signature of Signing Officer or Director

Date