2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Sep 30, 2010
Secretary of State

DOCUMENT# N05000000137

Entity Name: THE BELMONT AT ST. LUCIE WEST MASTER ASSOCIATION, INC.

Current Principal Place of Business:

103 SW PEACOCK BLVD
PORT ST. LUCIE, FL 34986

New Principal Place of Business:

Current Mailing Address:

103 SW PEACOCK BLVD
PORT ST. LUCIE, FL 34986

New Mailing Address:

FEI Number: 20-2328807 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GLICKMAN, LARRY Z ESQ
1850 SW FOUNTAINVIEW BLVD.
SUITE 207
PORT SAINT LUCIE, FL 34986 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: P
Name: LEVENHERZ, STEVEN
Address: 103 SW PEACOCK BLVD
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: 1VP
Name: LANUNZIATA, PAUL
Address: 103 SW PEACOCK BLVD.
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: T
Name: HAUGER, BARBARA
Address: 103 SW PEACOCK BLVD.
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: S
Name: D'ALBERTO, VERONICA
Address: 103 SW PEACOCK BLVD.
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: 2VP
Name: WEISS, MICHAEL
Address: 103 SW PEACOCK BLVD.
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: D
Name: MUIR, CAROL
Address: 103 SW PEACOCK BLVD
City-St-Zip: PORT ST. LUCIE, FL 34986

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL WEISS 2VP 09/30/2010

Electronic Signature of Signing Officer or Director — Date