2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000137

FILED Mar 24, 2011 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

103 SW PEACOCK BLVD PORT ST. LUCIE, FL 34986

Current Mailing Address: New Mailing Address:

103 SW PEACOCK BLVD PORT ST. LUCIE, FL 34986

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GLICKMAN, LARRY Z ESQ 1850 SW FOUNTAINVIEW BLVD. SUITE 207 PORT SAINT LUCIE, FL 34986 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

 Name:
 LEVENHERZ, STEVEN

 Address:
 103 SW PEACOCK BLVD

 City-St-Zip:
 PORT ST. LUCIE, FL 34986

Title: 1VP

Name: D'ALBERTO, VERONICA
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: [

Name: FILAN, MARY

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:

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: BARBARA HAUGER T 03/24/2011