

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000576

FILED  
Jan 31, 2011  
Secretary of State

**Entity Name:** BELLEZA AT PONTE VEDRA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

200 BOARDWALK DR.  
PONTE VEDRA BEACH, FL 32082

**New Principal Place of Business:**

**Current Mailing Address:**

200 BOARDWALK DR.  
PONTE VEDRA BEACH, FL 32082

**New Mailing Address:**

**FEI Number:** 20-2221183

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SALCEDO, LYNN LCAM  
200 BOARDWALK DRIVE  
PONTE VEDRA BEACH, FL 32082 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  
Name: SMITH, MARLENE L  
Address: 425 TIMBERWALK CT.  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: S  
Name: GREENBERG, MARYANN  
Address: 300 BOARDWALK DRIVE  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: P  
Name: ROGERS, DAVID  
Address: 605 BOARDWALK DRIVE  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VP  
Name: NEIZVEST, LEYA  
Address: 440 TIMBERWALK COURT  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: T  
Name: KAMMERDIENER, SHANE  
Address: 605 BOARDWALK DRIVE  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: LYNN SALCEDO

LCAM

01/31/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date