

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000779

FILED
Apr 25, 2007
Secretary of State

Entity Name: THE BELLEAIR VILLAGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1550 S. BELCHER RD.
CLEARWATER, FL 33764

New Principal Place of Business:

1550 S BELCHER RD
CLEARWATER, FL 33764 US

Current Mailing Address:

7300 PRK ST
SEMINOLE, FL 33777

New Mailing Address:

C/O RESOURCE PROPERTY MGMT
7300 PARK STREET
SEMINOLE, FL 33777 US

FEI Number: 41-2194171

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RESOURCE PROPERTY MGMT
7300 PRK ST
SEMINOLE, FL 33777 US

Name and Address of New Registered Agent:

RESOURCE PROPERTY MGMT
7300 PARK STREET
SEMINOLE, FL 33777 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:

04/25/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PAWLOSKY, STANLEY
Address: 15505 BELCHER RD 512
City-St-Zip: CLEARWATER, FL 33764

Title: VPD () Delete
Name: ALTERERI, JACQUELYN
Address: 15505 BELCHER RD 122
City-St-Zip: CLEARWATER, FL 33764

Title: TD () Delete
Name: KANE, SHARON
Address: 155505 BELCHER RD 434
City-St-Zip: CLEARWATER, FL 33764

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ALTIERI, JACKIE
Address: 1550 S BELCHER RD #122
City-St-Zip: CLEARWATER, FL 33764

Title: VP (X) Change () Addition
Name: BERKMAN, DONNA
Address: 1550 S BELCHER RD #117
City-St-Zip: CLEARWATER, FL 33764

Title: S/T (X) Change () Addition
Name: KANE, SHARON
Address: 1550 S BELCHER RD #434
City-St-Zip: CLEARWATER, FL 33764

Title: D () Change (X) Addition
Name: BULMAN, RICHARD
Address: 1550 S BELCHER RD #113
City-St-Zip: CLEARWATER, FL 33764

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: JILL ELLIS/STH

PM

04/25/2007

Electronic Signature of Signing Officer or Director

Date