

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001415

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: BELLA TRAE COMMUNITY ASSOCIATION, INC.

## Current Principal Place of Business:

2180 WEST SR 434 SUITE 5000  
LONGWOOD, FL 327795044

## New Principal Place of Business:

## Current Mailing Address:

2180 WEST SR 434 SUITE 5000  
LONGWOOD, FL 327795044

## New Mailing Address:

FEI Number: 16-1754079

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HART, JAMES W JR.  
C/O SENTRY MANAGEMENT INC  
2180 W. SR 434, STE. 5000  
LONGWOOD, FL 327795044 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: PD ( ) Delete  
Name: CABRERA, DIANA  
Address: 4901 VINELAND RD SUITE 500  
City-St-Zip: ORLANDO, FL 32811

Title: VPSD ( ) Delete  
Name: EMERSON, KIM  
Address: 4901 VINELAND RD SUITE 500  
City-St-Zip: ORLANDO, FL 32811

Title: VPTD ( ) Delete  
Name: BALL, CLINT  
Address: 4901 VINELAND RD SUITE 500  
City-St-Zip: ORLANDO, FL 32811

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change ( ) Addition  
Name: MIHELICH, BRIAN  
Address: 4901 VINELAND RD SUITE 500  
City-St-Zip: ORLANDO, FL 32811

Title: TD (X) Change ( ) Addition  
Name: MAJZLIK, KELLY  
Address: 4901 VINELAND RD SUITE 500  
City-St-Zip: ORLANDO, FL 32811

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: DIANA CABRERA

PD

03/23/2009

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

\_\_\_\_\_  
Date