

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006422

FILED
Apr 02, 2009
Secretary of State

Entity Name: BELLA TERRAZA HOMEOWNERS ASSOCIATION, INC

Current Principal Place of Business:

11706 N ARMENIA AVE
TAMPA, FL 33612

New Principal Place of Business:

12738 N. FLORIDA AVENUE
TAMPA, FL 33612

Current Mailing Address:

11706 N ARMENIA AVE
TAMPA, FL 33612

New Mailing Address:

12738 N. FLORIDA AVENUE
TAMPA, FL 33612

FEI Number: 20-5423271

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSEMURGY, ALEXANDER S
11706 N ARMENIA AVE
TAMPA, FL 33612 US

Name and Address of New Registered Agent:

SCARR, MARINA
12738 N. FLORIDA AVENUE
TAMPA, FL 33612 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: MARINA

04/02/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ROSEMURGY, ALEXANDER S
Address: 11706 N ARMENIA AVE
City-St-Zip: TAMPA, FL 33612

Title: D () Delete
Name: ROSEMURGY, PERCY
Address: 11706 N ARMENIA AVE
City-St-Zip: TAMPA, FL 33612

Title: D (X) Delete
Name: ROSEMURGY, KATHRYN B
Address: 11706 N ARMENIA AVE
City-St-Zip: TAMPA, FL 33612

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BASSIL, GEORGE
Address: 3332 WESTMORELAND DRIVE
City-St-Zip: TAMPA, FL 33618

Title: ST (X) Change () Addition
Name: SCARR, MARINA
Address: 12738 N. FLORIDA AVENUE
City-St-Zip: TAMPA, FL 33612

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

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: MARINA SCARR

S

04/02/2009

Electronic Signature of Signing Officer or Director

Date