## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000006556

FILED Apr 08, 2008 Secretary of State

Entity Name: BELLA TERRA VILLAS II HOMEOWNERS ASSOCIATION, INC.

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

13100 WESTLINKS TERRACE 11691 GATEWAY BOULEVARD, SUITE 203

FORT MYERS, FL 33913 FORT MYERS, FL 33913

Current Mailing Address: New Mailing Address:

13100 WESTLINKS TERRACE 11691 GATEWAY BOULEVARD, SUITE 203

FORT MYERS, FL 33913 FORT MYERS, FL 33913

FEI Number: 20-5381187 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:

CLARK, KEVIN S & S GOLF MANAGEMENT, INC.
13100 WESTLINKS TERRACE 11691 GATEWAY BOULEVARD, SUITE 203

FORT MYERS, FL 33913 US FORT MYERS, FL 33913 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: REBECCA L. SARVER 04/08/2008

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: D () Delete Title: P (X) Change () Addition

Name: CLARK, KEVIN Name: CLARK, KEVIN

Address: 13100 WESTLINKS TERRACE Address: 11691 GATEWAY BOULEVARD, SUITE 203

City-St-Zip: FORT MYERS, FL 33913 City-St-Zip: FORT MYERS, FL 33913

Title: D ( ) Delete Title: VP (X) Change ( ) Addition

Name: HASH, NORMAN Name: BEULAH, ALAN
Address: 13100 WESTLINKS TERRACE Address: 11691 GATEWAY BOULEVARD. SUITE 203

City-St-Zip: FORT MYERS, FL 33913 City-St-Zip: FORT MYERS, FL 33913

Title: D ( ) Delete Title: S/T (X) Change ( ) Addition Name: WILLIAMS, STEVE Name: HERMINA, MANNY

Address: 13100 WESTLINKS TERRACE Address: 11691 GATEWAY BOULEVARD, SUITE 203

City-St-Zip: FORT MYERS, FL 33913 City-St-Zip: FORT MYERS, FL 33913

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: KEVIN CLARK P 04/08/2008