

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000373

FILED
Apr 09, 2009
Secretary of State

Entity Name: BELLA RIVA CONDOMINIUM OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

874 VENUS COURT
FORT WALTON BEACH, FL

New Principal Place of Business:

874 VENUS COURT
FORT WALTON BEACH, FL 32548

Current Mailing Address:

546 MARY ESTHER CUTOFF
FORT WALTON BEACH, FL 32548

New Mailing Address:

FEI Number: 20-8220606

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANCHORS, MICHELLE
909 MAR WALT DRIVE SUITE 1014
FORT WALTON BEACH, FL 32547 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: VPD () Delete
Name: DUNKLE, GERALD R
Address: 1234 AIRPORT RD., #124
City-St-Zip: DESTIN, FL 32541

Title: DST () Delete
Name: HARRISON, JOHN W
Address: 1234 AIRPORT RD., #124
City-St-Zip: DESTIN, FL 32541

Title: PD () Delete
Name: CORMACK, CRAIG
Address: 6101 S 58TH STE B
City-St-Zip: LINCOLN, NE 68516

Title: D () Delete
Name: SALASSA, RAYMOND
Address: POB 1526
City-St-Zip: OSAGE BEACH, MO 65065

Title: D () Delete
Name: GRIZZLE, LARRY
Address: POB 11053
City-St-Zip: JASPER, GA 30143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DST (X) Change () Addition
Name: HARRISON, JOHN W
Address: 1234 112 N. BAY VIEW ST.
City-St-Zip: FAIR HOPE, AL 36532

Title: PD (X) Change () Addition
Name: CORMACK, CRAIG
Address: 874 VENUS CT # 406
City-St-Zip: FT. WALTON BEACH, FL 32548

Title: D (X) Change () Addition
Name: SUKTORF, STEVE
Address: 602 HARBOR BLVD, #101
City-St-Zip: DESTIN, FL 32541

Title: D (X) Change () Addition
Name: GRIZZLE, LARRY
Address: POB 11053
City-St-Zip: BIG CANOE, GA 30143

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: MARC A. CRIMMINS

PRES

04/09/2009

Electronic Signature of Signing Officer or Director

Date