

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000002468

FILED
Apr 22, 2009
Secretary of State

Entity Name: BELLA VILLAGIO HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

4801 S UNIVERSITY DRIVE
STE 132
DAVIE, FL 33328

New Principal Place of Business:

Current Mailing Address:

4801 S UNIVERSITY DRIVE
STE 132
DAVIE, FL 33328

New Mailing Address:

FEI Number: 20-8743840

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEW COMMUNITY STRATEGIES
4801 S UNIVERSITY DRIVE
STE 132
DAVIE, FL 33328 US

Name and Address of New Registered Agent:

STRALEY AND OTTO PA
2699 STIRLING RD.
STE C-207
HOLLYWOOD, FL 33312 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: CHARLES OTTO

04/22/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MACK, BRIAN
Address: 19 SE 3 AVE
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: VTD () Delete
Name: PATTERSON, SCOTT
Address: 37 SE 3 AVENUE
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: D () Delete
Name: BRANDOLINO, ROSE
Address: 21 SE 3 AVENUE
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: D () Delete
Name: CERNA, FERNANDO
Address: 35 SE 3 AVENUE
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: S () Delete
Name: JONES, CRISTINA
Address: 35 SE 3 AVE
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: D (X) Delete
Name: TUCHINSKY, HOWARD
Address: 43 SE 3 AVENUE
City-St-Zip: HALLANDALE BEACH, FL 33009

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MAHER, ANTHONY
Address: 47 SE 3 AVE
City-St-Zip: HALLANDALE BEACH, FL 33009

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

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

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

Title: S (X) Change () Addition
Name: LESLIE, KATHLEEN
Address: 13 SE 3 AVE
City-St-Zip: HALLANDALE BEACH, FL 33009

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: SCOTT PATTERSON

VTD

04/22/2009

Electronic Signature of Signing Officer or Director

Date