## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07195

FILED Mar 06, 2009 Secretary of State

Entity Name: BEL-AIR BEACH CLUB ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 780 ESTERO BLVD. FT. MYERS BEACH, FL 339312100 **Current Mailing Address: New Mailing Address:** 780 ESTERO BLVD FT. MYERS BEACH, FL 339312100 FEI Number: 59-2300075 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: MELHUISH, BETTY 3843 LAKE BAYSHORE DR UNIT 102F BRADENTON, FL 34205 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete MELHUISH, BETTY Name: Name: 3843 LAKE BAYSHORE DRIVE UNIT 102F Address: Address: City-St-Zip: BRADENTON, FL 34205 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition SAUL, ROBERT Name: TALLMAN, CHARLES Name: Address: 2331 E 5TH STREET, #104 Address: 5 CUTTERS PATH City-St-Zip: LEHIGH ACRES, FL 33970 City-St-Zip: ITHACO, NY 14850 Title: () Delete Title: **TREA** (X) Change ( ) Addition SHIVELY, DAVID DEALEY, LARRY Name: Name: 10637 WEST ANGLIN ROAD Address: Address: 1439 C17 City-St-Zip: ETNA GREEN, IN 46524 City-St-Zip: **CONVOY. OH 45832** Title: ( ) Delete Title: (X) Change ( ) Addition WACHSMUTH, RAYMOND Name: Name: SAUL, ROBERT W 4809 NORTH SHORE DRIVE Address: Address: PO BOX 1955 WAUPACA, WI 54981 City-St-Zip: City-St-Zip: LEHIGH ACRES, FL 33970 Title: () Delete Title: () Change () Addition SAWYER, WILLIAM Name: Name: 780 ESTERO BLVD, #201 Address: Address: City-St-Zip: FORT MYERS BEACH, FL 33931 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition DEALEY, LARRY COZZO, KRIS Name: Name: Address: 1439 C 17 Address: 19752 REGAN RD CONVOY, OH 45832 NEW LENNOX, IL 60451 City-St-Zip: 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: BETTY MELHUISH PRES 03/06/2009