

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19097

FILED  
Apr 20, 2010  
Secretary of State

**Entity Name:** BELLEVIEW ISLAND HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

400 ST ANDREWS DR  
BELLEAIRE, FL 33765 US

**New Principal Place of Business:**

**Current Mailing Address:**

7300 PARK ST  
SEMINOLE, FL 337774601 US

**New Mailing Address:**

**FEI Number:** 59-2783378

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

REINHARDT, DEBRA  
RESOURCE MGMT, INC.  
7300 PARK ST  
SEMINOLE, FL 337774601 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:** P  
**Name:** DUPONT, THOMAS  
**Address:** 430 ST. ANDREWS DRIVE  
**City-St-Zip:** BELLEAIR, FL

**Title:** VP  
**Name:** CARLISLE, DANIEL, W  
**Address:** 426 ST ANDREWS DR  
**City-St-Zip:** BELLEAIR, FL

**Title:** D  
**Name:** SWEENEY, BILL  
**Address:** 408 ST ANDREWS DRIVE  
**City-St-Zip:** BELLEAIR, FL 33756

**Title:** S  
**Name:** LASROSA, BILL  
**Address:** 409 ST. ANDREWS DR  
**City-St-Zip:** BELLEAIR, FL 33756

**Title:** D  
**Name:** TEYETLEBAUM, LEO  
**Address:** 411 ST ANDREWS DR  
**City-St-Zip:** BELLEAIR, FL 33756

**Title:** T  
**Name:** MEAGHER, MIKE  
**Address:** 412 ST ANDREWS DR  
**City-St-Zip:** BELLEAIR, FL 33756

I hereby 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 all other like empowered.

**SIGNATURE:** TOM DUPONT

P

04/20/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date