

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36769

FILED
Feb 04, 2005
Secretary of State

Entity Name: BEL LIDO VILLAS PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1124 HIGHLAND BEACH DRIVE
HIGHLAND BEACH, FL 33487

New Principal Place of Business:

Current Mailing Address:

1124 HIGHLAND BEACH DRIVE
HIGHLAND BEACH, FL 33487

New Mailing Address:

FEI Number: 65-0255687

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MENDELSON, RICHARD N.
1124 HIGHLAND BEACH DRIVE, #1
HIGHLAND BEACH, FL 33487 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: PD () Delete
Name: MOODY, JUANITA
Address: 1124 HIGHLAND BCH DR. #2
City-St-Zip: HIGHLAND BEACH, FL

Title: VD () Delete
Name: MORRIS, HENRY
Address: 1124 HIGHLAND BCH DR. #3
City-St-Zip: HIGHLAND BEACH, FL

Title: TD () Delete
Name: MENDELSON, RICHARD,
Address: 1124 HIGHLAND BCH DR. #1
City-St-Zip: HIGHLAND BEACH, FL

Title: S () Delete
Name: MORRIS, JANET
Address: 1124 HIGHLAND BEACH DR #3
City-St-Zip: HIGHLAND BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: RICHARD N. MENDELSON

TD

02/04/2005

Electronic Signature of Signing Officer or Director

Date