

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36769

FILED  
Mar 31, 2008  
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: TSD ( ) Delete  
Name: MENDELSON, RICHARD,  
Address: 1124 HIGHLAND BCH DR. #1  
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:

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: RICHARD N MENDELSON

TSD

03/31/2008

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

\_\_\_\_\_  
Date