FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000002566 (7)

BELZ ACADEMY, INC.

FILED Feb 05 1998 8:00am Secretary of State

Principal Place of Business		Mailing Address		F JADSSER OLD TOTAL DELIG BOSE BOSE	ADDIA BANK (1861 BINIS BI	14 0 014 1001	
1635 COLOMAL BLVD. FT MYERS FL 33907		1835 COLONIAL BLVD. FT MYERS FL 33907		3. Date Incorporated or Qualified 05/20/1994			
					4. FEI Number		olied For
2. Principal P	lace of Business	2a. Mailing Address			65-0497504		Applicable
21		26		5. Certificate of Status Desired] \$8.75 Ad Fee Req		
I SUITA ADI A AIC		Suite, Apt. #, etc.		6. Election Campaign Financing	\$5.00 M		
22		27		Trust Fund Contribution			
City & State		City & State			7. Is this nonprofit corporation a homeowners association?		
Zip Country		Zip Country		8. This corporation owes or has paid the		naible	
24	25		30	,	Personal Property Tax due June 30.		No No
	9. Name and Address of Cui				10. Name and Address of New Regist		
			81	Name	•		
BELZ, ANDREA			82	Street	Address (P.O. Box Number is Not Acceptable)		
	DLONIAL BLVD.		83				
FT MYERS FL 33907			53				
			84	City		FL 85 Zip Co	ode
11. Pursuant	to the provisions of Sections 617.	0502 and 617.1508, Florida Statutes	s, the abov	I e-named	d corporation submits this statement for the purp poration's board of directors. I hereby accept the		registered
office or r	egistered agent, or both, in the St m familiar with, and accept the ot	late of Florida. Such change was au oligations of, Section 617.0503, Flori	ithorized by ida Statute:	y the cor s.	poration's board of directors. I hereby accept the	e appointment as re	agistered
SIGNATURE							
12.	Signature, typed or printed name of registered			ent signature		ATE	
TITLE	D	AND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS	Change	IN 12
NAME	BELZ, ANDREA		1.2 NAME			L. Change	Addition
STREET ADDRESS	4370 TUFTS AVE		1.3 STREET	ADDRESS			
CITY-ST-ZIP	FT MYERS FL 33901		1.4 CITY-ST-ZiP				
TITLE	Ď	DELETE	2.1 TITLE			☐ Change	Addition
NAME	Furlow, Kelsey		2.2 NAME				
STREET ADDRESS	4370 TUFTS AVENUE		2.3 STREET ADDRESS				
CITY-ST-ZIP	FT MYERS FL 33901	DELETE	2. 4 CITY-ST-ZIP				Tel Address
TITLE NAME	D Higgins, David	(3K) DETEK	3.1 TITLE 3.2 NAME		Chancelle. Sherry	∐ Change	Addition
STREET ADDRESS	3949 EVANS AVE		3.2 NAME 3.3 STREET	ADORESS	Chappelle, Sherry 300.	5 E	
CITY-ST-ZIP	FT MYERS FL 33901		3.4. CITY-5		Ft. MUERS, FL. 339	05	
TITLE	C	DELETE	4.1 TITLE			☐ Change	Addition
NAME	PATTON, EVELYN		4. 2 NAME				
STREET ADDRESS	481 MARSH AVENUE		4.3 STREET	ADDRESS			
CITY-ST-ZIP	FT. MYERS FL 33905		4.4 CITY - S	T-ZIP			
TITLE	D ACTION CAROLINA	☐ DELETE	5.1 TITLE			☐ Change	Addition
NAME OTRECT ADDRESS	MELTON, CAROLYN		5.2 NAME	1000500			
STREET ADDRESS	2107 SUNRISE BLVD. FT MYERS FL 33907	_	5.3 STREET				_
CITY-ST-ZIP TITLE	R MIENO PL 3380/	DELETE	5.4 CITY-S 6.1 TITLE	1-ZIP	C	Change	Addition
NAME	OUDERKIRK, ANNETTE	(-E) Partie	6.2 NAME			Silange	- Andrian
STREET ADDRESS	2750 ROYAL PALM AVE.		6.3 STREET	ADDRESS	Johns, Bonnie 12518 River Rd. S.E.		
CITY- ST. 78P	FT MYERS EL 33001		64 CITY C	7 710	14 mugos Fi 23004		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.