

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002566

FILED  
Apr 27, 2005  
Secretary of State

Entity Name: BELZ ACADEMY, INC.

**Current Principal Place of Business:**

1635 COLONIAL BLVD.  
FT MYERS, FL 33907

**New Principal Place of Business:**

**Current Mailing Address:**

1635 COLONIAL BLVD.  
FT MYERS, FL 33907

**New Mailing Address:**

FEI Number: 65-0497504

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BELZ, ANDREA  
1635 COLONIAL BLVD.  
FT MYERS, FL 33907 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: D ( ) Delete  
Name: BELZ, ANDREA  
Address: 4370 TUFTS AVE  
City-St-Zip: FT MYERS, FL 33901

Title: D ( ) Delete  
Name: FURLOW, KELSEY  
Address: 4370 TUFTS AVENUE  
City-St-Zip: FT MYERS, FL 33901

Title: S ( ) Delete  
Name: CHAPPELLE, SHERRY  
Address: 13319 CARIBBEAN BLVD SE  
City-St-Zip: FT MYERS, FL 33905

Title: C ( ) Delete  
Name: SODANO, MARTHA  
Address: 4107 OASIS BLVD.  
City-St-Zip: CAPE CORAL, FL 33914

Title: D ( ) Delete  
Name: BENNETT, CARLA  
Address: PO BOX 380652  
City-St-Zip: MURDOCK, FL 33938

Title: C ( ) Delete  
Name: LAROSE, LEONARD  
Address: 3032 SW 5TH AV.  
City-St-Zip: CAPE CORAL, FL 33914

**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:

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: ANDREA BELZ

D

04/27/2005

Electronic Signature of Signing Officer or Director

Date