

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997  
AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED  
Aug 21 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N95000005992 (1)**

1. Corporation Name

**HOMEOWNERS' ASSOCIATION OF BELLE CHASE SUBDIVISION, INC.**



Principal Place of Business <b>1409 FIRST AVENUE EAST BRADENTON FL 34208</b>	Mailing Address <b>1409 FIRST AVENUE EAST BRADENTON FL 34208</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>21 730 28th Ave E.</b>		2a. Mailing Address <b>26 Same</b>		3. Date Incorporated or Qualified <b>12/21/1995</b>		3a. Date of Last Report <b>05/01/1996</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number <b>APPLIED FOR 65-0764416</b>		Applied For <input type="checkbox"/> Not Applicable	
22 City & State <b>23 Bradenton, FL</b>		27 City & State		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
24 Zip <b>34208</b>		25 Country <b>Manatee</b>		28 Zip		29 Country	
30		31		32		33	

g. Name and Address of Current Registered Agent <b>SVENSON, LINDA 1409 FIRST AVENUE EAST BRADENTON FL 34208</b>				10. Name and Address of New Registered Agent			
81 Name <b>Vera Jackson</b>				82 Street Address (P.O. Box Number is Not Acceptable) <b>730 28th Ave E.</b>			
83				84 City <b>Bradenton</b>			
85 Zip Code <b>FL 34208</b>							

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE **Vera Jackson** 8-15-97  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
	<b>PSTD SVENSON, LINDA</b>	<b>1409 FIRST AVENUE EAST</b>	<b>BRADENTON FL 34208</b>	<input checked="" type="checkbox"/> DELETE			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
	<b>D MANFULL, WILLIAM</b>	<b>1409 FIRST AVENUE EAST</b>	<b>BRADENTON FL 34208</b>	<input checked="" type="checkbox"/> DELETE			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
	<b>D ROGERS, ROBERT</b>	<b>1409 FIRST AVENUE EAST</b>	<b>BRADENTON FL 34208</b>	<input checked="" type="checkbox"/> DELETE			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
				<input type="checkbox"/> DELETE			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
				<input type="checkbox"/> DELETE			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP
				<input type="checkbox"/> DELETE			

14. I do 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.

SIGNATURE **Vera Jackson** 8-15-97 19911745-5847  
SIGNATURE REQUIRED

CR2E037 (4/97)