## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000002338

FILED Feb 04, 2008 Secretary of State

Entity Name: BELMONT LAKES PROPERTY OWNERS MASTER ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

2840 UNIVESITY DRIVE 4801 S. UNIVERSITY DR CORAL SPRINGS, FL 33065

SUITE 132

DAVIE, FL 33328

**Current Mailing Address: New Mailing Address:** 

4801 S. UNIVERSITY DR 2840 UNIVESITY DRIVE

SUITE 132 CORAL SPRINGS, FL 33065

DAVIE, FL 33328

FEI Number: 65-0678245 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GILLESPIE, III, R B NEW COMMUNITY STRATEGIES 1515 S FEDERAL HWY 4801 S. UNIVERSITY DR.

SUITE 300 SUITE 132 BOCA RATON, FL 33432 US DAVIE, FL 33328 US

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: MATTHEW ROSENBAUM 02/04/2008

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete

WILLS, DEBORAH A MADEO, LORRAINE Name: Name: 2840 UNIVERSITY DR Address: 15240 SW 16TH STREET Address:

City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: **DAVIE, FL 33326** 

Title: () Delete Title: (X) Change ( ) Addition PAIGO, RANDY Name: WILLIAMS, SHEILA Y Name:

Address: 2840 UNIVERSITY DR Address: 15190 SW 16TH STREET City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: **DAVIE, FL 33326** 

Title: () Delete Title: (X) Change ( ) Addition GLULLOTIE, JOSEPH WILLIAMS, FREDERICK L Name: Name:

2840 UNIVERSITY DRIVE 1560 SW 153RD WAY Address: Address: City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: DAVIE, FL 33326

Title: () Delete Title: ( ) Change (X) Addition

Name: Name: WILLIAMS, KRISTINA A 1560 SW 153RD WAY Address: Address: City-St-Zip: City-St-Zip: DAVIE, FL 33326

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: MATTHEW ROSENBAUM RΑ 02/04/2008