

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 13, 2009  
Secretary of State**

DOCUMENT# N96000003566

Entity Name: BELLA VISTA OCEAN CLUB CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1755 NORTH HWY A1A  
SUITE 100  
INDIALANTIC, FL 32903 US

**New Principal Place of Business:**

**Current Mailing Address:**

1755 NORTH HWY A1A  
SUITE 100  
INDIALANTIC, FL 32903 US

**New Mailing Address:**

FEI Number: 59-3425114      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

FILLEMAN, S.  
1755 NORTH HWY A1A  
SUITE 302  
INDIALANTIC, FL 32903 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: TD ( ) Delete  
Name: HASSOL, BOB  
Address: 1755 HWY A1A #602  
City-St-Zip: INDIALANTIC, FL 32903

Title: PD ( ) Delete  
Name: FILLEMAN, SPENCER  
Address: 1755 NORTH HWY A1A SUITE 302  
City-St-Zip: INDIALANTIC, FL 32903

Title: SD ( ) Delete  
Name: WIACK, RICHARD  
Address: 1755 N HWY A1A #502  
City-St-Zip: INDIALANTIC, FL 32903

Title: D ( ) Delete  
Name: MARTIN, RICK  
Address: 255 SEACREST DR  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: VD ( ) Delete  
Name: WENDELL, KISH  
Address: 1755 NORTH HWY A1A SUITE 301  
City-St-Zip: INDIALANTIC, FL 32903

**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: D (X) Change ( ) Addition  
Name: MARTIS, RICK  
Address: 255 SEACREST DR  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: VD (X) Change ( ) Addition  
Name: KISH, WENDELL  
Address: 1755 NORTH HWY A1A SUITE 301  
City-St-Zip: INDIALANTIC, FL 32903

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: ROBERT HASSOL

TREA

04/13/2009

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

\_\_\_\_\_  
Date