

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006473

FILED  
Mar 22, 2009  
Secretary of State

**Entity Name:** BELLAMY PLANTATION HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

480 BELLAMY DRIVE  
MONTICELLO, FL 32344

**New Principal Place of Business:**

**Current Mailing Address:**

480 BELLAMY DRIVE  
MONTICELLO, FL 32344

**New Mailing Address:**

**FEI Number:** 59-3451348

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GEIER, WILLIAM A  
480 BELLAMY DRIVE  
MONTICELLO, FL 32344 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: P ( ) Delete  
Name: GEIER, WILLIAM  
Address: 480 BELLAMY DRIVE  
City-St-Zip: MONTICELLO, FL 32344 US

Title: VP ( ) Delete  
Name: DONOVAN, SHARI  
Address: 145 BELLAMY DR  
City-St-Zip: MONTICELLO, FL 32344 US

Title: S/T ( ) Delete  
Name: JOHNSON, VICKIE  
Address: 525 BELLAMY DRIVE  
City-St-Zip: MONTICELLO, FL 32344 US

**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:

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: VICKIE JOHNSON

S/T

03/22/2009

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

\_\_\_\_\_  
Date