NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Kathorine Marris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 02, 1999 8:00 am **Secretary of State**

03-02-1999 90013 032 ****61.25

1999 DOCUMENT # N9700001578 BELLE MER OWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 8269 GULF BLVD 8269 GULF BLVD NAVVARE BEACH FL 32568 NAVVARE BEACH FL 32566 Date Incorporated or Qualifed 2a. Mailing Address 2. Principal Place of Business 03/13/1997 26 21 4. FEI Number Applied For Suite, Apt. #, etc. Suite, Apt. #, etc. 59-3442127 Not Applicable 22 \$8,75 Additional City & State City & State 5. Certificate of Status Desired Fee Required 23 Country \$5.00 May Be Zip 6. Election Campaign Financing Zlp Added to Fees: Trust Fund Contribution 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Street Address (P.O. Box Number is Not Acceptable) HUDSON, CAROL 82 8269 GULF BLVD NAWARE BEACH FL 32566 Zip Code City 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 phange was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I amplampliar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE (11/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. **☑** Addition ☐ Change DELETE MLE 11 IIII F 0 CR2E037 REIN, JAMES O 1 2 NAME WHITE, WAYNE NAME 820 SHAKES CREEK PKWY 13 STREET ADDRESS 4421 FREDERICKSBURG DRIVE STREET ADDRESS BERMINGHAM AL 35209 14 CITY-ST-ZP BIRMINGHAM, AL. 35213 CITY-ST-ZIP Change Addition DELETE 21 TITLE ALLEN NOTTINGHAM TITLE HART, W. CHRISTPOHER 22 NAME NAME 151 WYNNEHAVEN ROAD 2.3 STREET ADDRESS STE 6-A, 151 REGIONS WAY STREET ADDRESS MARY ESTHER, FL 32569 DESTIN FL 32541 2.4 CITY-ST-ZP CITY-ST-ZIP X Addition Change X DELETE 3.1 TITLE TITLE HUDSON, CAROL 32 NAVE HOWARD BEAR NAME 8525 OLD MARSH WAY 8271 GULF BLVD 3.3 STREET ADDRESS STREET ADDRESS MONTGOMERY, AL 36117 NAVVARE BEACH FL 32568 34. CTTY-ST-ZP CITY-ST-ZIF ☐ Addition DELETE Change 41 IIILE TILE 4.2 NAME PARTIN, TIM NAME P O BOX 240851 N/A 4.3 STREET ADDRESS STREET ADDRESS MONTGOMERY AL 36124 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 51 TIRE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CRY-ST-ZP CITY-ST-ZIP Addition 6.1 TITLE Change DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

CITY-ST-ZIP I 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 ceth; 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, with all other like empowered.

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| ATURE AND TYPED OR PR | NTED NAME OF SKINING OFFICER OR DIRECTOR |