2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003633

SCIONTI, JENNIE P

4415 DEERHOUND DR

LAND O LAKES, FL 34639

Name:

Address:

City-St-Zip:

FILED Mar 10, 2009 Secretary of State

Entity Name: BELL LAKE ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** 4415 DEERHOUND DR LAND O LAKES, FL 346393937 US **Current Mailing Address: New Mailing Address:** P.O. BOX 1123 LAND O'LAKES, FL 34639 US FEI Number: 59-3447214 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: KUENZEL, DIANE V 4111 LAND O' LAKES BLVD, SUITE 302-D LAND O' LAKES, FL 34639 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: VPD () Delete () Change () Addition HOFFMAN, LESLIE E Name: Name: Address: 4607 ROBERTS RD Address: City-St-Zip: LAND O LAKES, FL 346391987 City-St-Zip: Title: () Delete Title: () Change () Addition SCIONTI, JENNIE P Name: Name: Address: 4415 DEERHOUND DR. Address: City-St-Zip: LAND O LAKES, FL 34639 City-St-Zip: () Delete Title: Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JENNIE SCIONTI PD 03/10/2009