

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90188 035 ****61.25

DOCUMENT # N99000004347

1. Entity Name
BELMONT LAKES HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**920 THIRD STREET STE B
NEPTUNE BEACH, FL 32266 US**

Mailing Address
**920 THIRD STREET STE B
NEPTUNE BEACH, FL 32266 US**

40082440



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04052007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
59-3594475

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**WALLACE, L. DENISE
920 THIRD STREET STE B
NEPTUNE BEACH, FL 32266**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME COHICK, CHRISOTPER ☒ Delete
STREET ADDRESS 97 REEDING RIDGE DR E
CITY-ST-ZIP JACKSONVILLE, FL 32225

TITLE D
NAME SMITH, JOHN ☐ Delete
STREET ADDRESS 35 REEDING RIDGE DR W
CITY-ST-ZIP JACKSONVILLE, FL 32225

TITLE VD
NAME SHAFFER, KELLY T ☒ Delete
STREET ADDRESS 58 REEDING RIDGE DR W
CITY-ST-ZIP JACKSONVILLE, FL 32225

TITLE STD
NAME THIBAUT, KEVIN ☒ Delete
STREET ADDRESS 66 REEDING RIDGE DR W
CITY-ST-ZIP JACKSONVILLE, FL 32225

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Change ☒ Addition
NAME Canavan, Denise B.
STREET ADDRESS 35 Sterling Hill Drive
CITY-ST-ZIP Jacksonville, FL 32225

TITLE VD ☒ Change ☐ Addition
NAME Smith, John
STREET ADDRESS 35 Reeding Ridge Dr. W.
CITY-ST-ZIP Jacksonville, FL 32225

TITLE TD ☐ Change ☒ Addition
NAME Hartigan, Martin A.
STREET ADDRESS 12569 Belmont Lakes Drive
CITY-ST-ZIP Jacksonville, FL 32225

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Denise B. Canavan
DENISE B. CANAVAN

4/16/07

Date

Daytime Phone #

404-
320-4460