I hereby 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 all other like empowered.				
SIGNATURE: JUDY HANKS	ASST. TREASURER	04/16/2024		

I DAINNO

Electronic Signature of Signing Officer/Director Detail

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	E: MICHAEL KNIGHT			04/16/2024		
	Electronic Signature of Registered Agent			Date		
Officer/Director Detail :						
Title	PDT	Title	TDT			
Name	HEFELE, KATHY	Name	WRIGHT, CHERI			
Address	903 PONCE DE LEON BLVD.	Address	903 PONCE DE LEON BLVD.			
City-State-Zip:	BELLEAIR FL 33756	City-State-Zip:	BELLEAIR FL 33756			
Title	ASST. TREASURER	Title	VP			
Name	HANKS, JUDY	Name	CEREN, JACKIE			
Address	483 HARBOR DR. SOUTH	Address	903 PONCE DE LEON BLVD.			
City-State-Zip:	INDIAN ROCKS BEACH FL 33785	City-State-Zip:	BELLEAIR FL 33756			

FEI Number: 59-6151039

Name and Address of Current Registered Agent:

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

BELLEAIR GARDEN CLUB 903 PONCE DE LEON BLVD.

BELLEAIR, FL 33756 US

903 PONCE DE LEON BLVD. BELLEAIR, FL 33756

Current Mailing Address:

903 PONCE DE LEON BLVD. BELLEAIR, FL 33756

Entity Name: THE BELLEAIR GARDEN CLUB, INC.

DOCUMENT# 704876

Current Principal Place of Business:

Certificate of Status Desired: Yes

FILED Apr 16, 2024 Secretary of State 5915444192CC

Date