INC.	BELLEMONT FARMS PROPERTY OWNER	S' ASSOCIATI	ON, 4837	448324CC
Current Prin 16763 NW 77 P. MIAMI LAKES,				
Current Mail	ling Address:			
16763 NW 7 MIAMI LAKE	7 PATH S, FL 33016 US			
FEI Number	: 20-3361620		Certificate of Status	Desired: No
Name and A	ddress of Current Registered Agent:			
CENTOFANTI, A 16763 NW 77 PA MIAMI LAKES, F	ATH			
The above named	l entity submits this statement for the purpose of changing its regis	tered office or regis	tered agent, or both, in the State o	of Florida.
	l entity submits this statement for the purpose of changing its regis	tered office or regis	tered agent, or both, in the State o	of Florida. 03/17/2020
		tered office or regis	tered agent, or both, in the State o	
	ELECTRONIC SIGNATURE OF REGISTERED Agent	tered office or regis	tered agent, or both, in the State o	03/17/2020
SIGNATURE	ELECTRONIC SIGNATURE OF REGISTERED Agent	tered office or regis	tered agent, or both, in the State of	03/17/2020
SIGNATURE	ALEXANDRO CENTOFANTI Electronic Signature of Registered Agent ctor Detail :			03/17/2020
SIGNATURE Officer/Direc	ALEXANDRO CENTOFANTI Electronic Signature of Registered Agent Ctor Detail : PRESIDENT	Title	VP, TREASURER	03/17/2020
SIGNATURE Officer/Direc Title Name	ALEXANDRO CENTOFANTI Electronic Signature of Registered Agent Ctor Detail : PRESIDENT CENTOFANTI, ALEXANDRO	Title Name	VP, TREASURER AMAYA, KATHLEEN 16763 NW 77 PATH	03/17/2020
SIGNATURE Officer/Direc Title Name Address	Electronic Signature of Registered Agent Ctor Detail : PRESIDENT CENTOFANTI, ALEXANDRO 16763 NW 77 PATH	Title Name Address	VP, TREASURER AMAYA, KATHLEEN 16763 NW 77 PATH	03/17/2020
SIGNATURE Officer/Direc Title Name Address City-State-Zip:	E ALEXANDRO CENTOFANTI Electronic Signature of Registered Agent Ctor Detail : PRESIDENT CENTOFANTI, ALEXANDRO 16763 NW 77 PATH MIAMI LAKES FL 33016	Title Name Address	VP, TREASURER AMAYA, KATHLEEN 16763 NW 77 PATH	03/17/2020

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: BELLEMONT FARMS PROPERTY OWNERS' ASSOCIATION,

DOCUMENT# N0500008391

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: KATHLEEN AMAYA

16763 NW 77 PATH

MIAMI LAKES FL 33016

Address

City-State-Zip:

Electronic Signature of Signing Officer/Director Detail

VP

FILED Mar 17, 2020

Secretary of State