

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 09, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000015778 1. Entity Name BELLASERA, LLC	
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Principal Place of Business 6620 ESTERO BLVD. FORT MYERS, FL 33931	Mailing Address 6620 ESTERO BLVD. FORT MYERS, FL 33931
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DO NOT WRITE IN THIS SPACE



02032004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 01-0727868	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent VOGEL, JAMES D 3936 TAMiami TRAIL NORTH, SUITE B NAPLES, FL 33931

**DO NOT WRITE
IN THIS SPACE**

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
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**Filing Fee is \$50.00
Due by May 1, 2004**

000000042429
02/10/04-80023-024 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR SUNSTREAM, INC. 6620 ESTERO BLVD. FORT MYERS, FL 33931
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE	2-04-04 Date	239-765-4111 Daytime Phone #
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