


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000007611
1. Entity Name
BELLA VILLA ARTISTRY, L. L. C.



Principal Place of Business Mailing Address
3301 SOUTH COCONUT ISLAND DR.
SUITE 101
BONITA SPRINGS, FL 34134-9149 US 3301 SOUTH COCONUT ISLAND DR.
SUITE 101
BONITA SPRINGS, FL 34134-9149 US



03272006 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number: 20-1372493 Applied For: Not Applicable

5. Certificate of Status Desired: \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ROBBOLINO, JOHN JR.
3301 SOUTH COCONUT ISLAND DR.
SUITE 101
BONITA SPRINGS, FL 34134-9149

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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: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
Due by May 1, 2006**

U00000459752
04/24/06-80044-003 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	ROBBOLINO, JOHN JR.
STREET ADDRESS	3301 SOUTH COCONUT ISLAND DR., SUITE 101
CITY-ST-ZIP	BONITA SPRINGS, FL 341349149
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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 exemptions contained in Chapter 119, 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: John Robbolino Jr. Date: 4/6/06 Daytime Phone #: 239-498-9179
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE