

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000110682

Entity Name: BELLA CABINETRY, LLC

FILED
Mar 12, 2007
Secretary of State

Current Principal Place of Business:

107 SW 19 LN
CAPE CORAL, FL 33991

New Principal Place of Business:

2168 CHANNEL WAY
NFM, FL 33917

Current Mailing Address:

107 SW 19 LN
CAPE CORAL, FL 33991

New Mailing Address:

2168 CHANNEL WAY
NFM, FL 33917

FEI Number: 01-0850217

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERRAZZANO, RICHARD K JR.
107 SW 19 LN
CAPE CORAL, FL 33991 US

Name and Address of New Registered Agent:

FERRAZZANO, RICHARD K JR.
2168 CHANNEL WAY
NFM, FL 33917 US

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: R.FERRAZZANO

03/12/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: FERRAZZANO, RICHARD K JR.
Address: 107 SW 19 LN
City-St-Zip: CAPE CORAL, FL 33991 US

Title: MGRM () Delete
Name: SIEVEKING, PEGGY S
Address: 107 SW 19 LN
City-St-Zip: CAPE CORAL, FL 33991 US

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: FERRAZZANO, RICHARD K JR.
Address: 2168 CHANNEL WAY
City-St-Zip: NFM, FL 33917 US

Title: VP (X) Change () Addition
Name: SIEVEKING, PEGGY S
Address: 2168 CHANNEL WAY
City-St-Zip: NFM, FL 33917 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: R.FERRAZZANO

PRES

03/12/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date