## 2008 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2008

## EIDED SECRETARY OF STATE DOCUMENT # A02000001316 TALLAHASSEE, FLORIDA 1. Entity Name ADDÓME BELLA, LLLP 08 MAR II PM և։ ևո Principal Place of Business Mailing Address 4270 LAKE IN THE WOODS DR. 4270 LAKE IN THE WOODS DR. SPRING HILL, FL 34607 SPRING HILL, FL 34607 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01252008 Chg-LP CR2E003 (12/06) City & State City & State 4. FEI Number Applied For 82-0568697 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required ~6,-Name and Address of Current Registered Agent 7.\_Name.and Address.of.New.Registered Agent VITTONE, NANCY 7445 COOL BREEZE COURT Street Address (P.O. Box Number is Not Acceptable) SPRING HILL, FL 34607 Zip Code 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, typed or printed name of registered agent and title if applicable DATE FILE NOW!!! FEE IS \$500.00 After May 1, 2008, Fee will be \$900.00 A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. 12. GENERAL PARTNER INFORMATION 13. DOCUMENT # STREET ADDRESS VITTONE, NANCY NAME STREET ADDRESS 7445 COOL BREEZE COURT CITY-ST-ZIP City-\$t-ZiP SPRING HILL, FL 34607 DOCUMENT # STREET ADDRESS NAME DOHERTY, NICOLE STREET ADDRESS 2051 WATERFALL DR. CITY-ST-7IP CITY-ST-ZIF SPRING HILL, FL 34608 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIF DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP 14. 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes