## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## Apr 17, 2006 08:00 AM Secretary of State DOCUMENT # L03000043935 1. Entity Name BELLARD, LLC Principal Place of Business Mailing Address 2784 GULF BREEZE PKWY **2784 GULF BREEZE PKWY** GULF BREEZE, FL 32563 GULF BREEZE, FL 32563 04142006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0841176 Not Applicabl \$5.00 Additional 5. Certificate of Status Desired 5. Name and Address of Current Registered Agent GIGHTOWER, DAVID E DO NOT WRITE 501 COMMENDENCIA ST. PENSACOLA, FL 32502 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. (am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Dath Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 04/29/06-80245-025 50.00 9. TITLE BATTEN, ANGIE B NAME 2784 GULF BREEZE PKWY STREET ADDRESS CKTY-ST-ZIP GULF BREEZE, FL 32563 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CHTY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

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 limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 808, Florida Statutes

SIGNATURE:

T)T) F NAME STREET ADDRESS CITY-ST-ZIE

THORIZED REPRESENTATIVE

FILED