

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 25, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000004817

1. Entity Name
BELCOURT, LLC



Principal Place of Business
46 N. WASHINGTON BLVD., #1
SARASOTA, FL 34236

Mailing Address
46 N. WASHINGTON BLVD., #1
SARASOTA, FL 34236



02212007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0620742	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LPS CORPORATE SERVICES, INC
46 N WASHINGTON BLVD
STE 1
SARASOTA, FL 34236

**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 _____

**Filing Fee is \$50.00
Due by May 1, 2007**

000000770498
07/25/07-80006-006 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	SIEGEL, MICHAEL E
STREET ADDRESS	46 N. WASHINGTON BLVD., #1
CITY-ST-ZIP	SARASOTA, FL 34236

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Maya Mader

July 19th 2007 (941) 365-0550

Date

Daytime Phone #