2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2006
Secretary of State

DOCUMENT# L04000049617

Entity Name: MIRA BELLA DEVELOPMENT, LLC

Current Principal Place of Business:

149 MARTESIA WAY
INDIAN HARBOUR BEACH, FL 32937

New Principal Place of Business:

Current Mailing Address:

149 MARTESIA WAY
INDIAN HARBOUR BEACH, FL 32937

New Mailing Address:

FEI Number: 20-1307648 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FRESE, GARY B
930 S. HARBOR CITY BOULEVARD, STE. 505
MELBOURNE, FL 32901 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: WILLGROVE USA, INC.,
Address: 145 MARTESIA WAY
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: MGRM ( ) Delete
Name: POWERS, THOMAS L TRUSTEE
Address: 149 MARTESIA WAY
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: MGRM ( ) Delete
Name: POWERS, DORIS G TRUSTEE
Address: 149 MARTESIA WAY
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: KEVIN WILLIS D 04/29/2006

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