

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000062888

Entity Name: BELLA PALMS, LLC

FILED  
Mar 18, 2008  
Secretary of State

**Current Principal Place of Business:**

5051 SW MARKEL STREET  
PALM CITY, FL 34990

**New Principal Place of Business:**

**Current Mailing Address:**

4700 N FLAGLER DR.  
UNIT 104  
W. PALM BEACH, FL 33407

**New Mailing Address:**

FEI Number: 68-0633887

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LAW OFFICE OF LINDA KNOERR  
4992 N PINE ISLAND ROAD  
SUNRISE, FL 33351 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: P ( ) Delete  
Name: GONZALEZ, DAVID  
Address: 5051 SW MARKEL STREET  
City-St-Zip: PALM CITY, FL 34990 US

Title: VP ( ) Delete  
Name: EPPINGER, RON JR.  
Address: 435 N ANDREWS AVE  
City-St-Zip: FT LAUDERDALE, FL 33301 US

Title: S ( ) Delete  
Name: DANIELSON, MARY ELLEN  
Address: 1020 SE 13 AVENUE  
City-St-Zip: DEERFIELD BEACH, FL 33441 US

Title: T ( ) Delete  
Name: BEVILACQUA, GREG  
Address: 4700 N. FLAGLER DR, UNIT 104  
City-St-Zip: WEST PALM BEACH, FL 33407 US

**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:

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

I hereby certify that the information supplied with this filing does not qualify 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: MARY ELLEN DANIELSON

S

03/18/2008

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