


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 20, 2006 8:00 am
Secretary of State

02-20-2006 90142 037 ****50.00

DOCUMENT # L04000089784	
1. Entity Name BELLEAH INVESTMENTS, L.L.C.	

Principal Place of Business 1 FLORIDA PARK DRIVE N., SUITE 105B PALM COAST, FL 32137	Mailing Address PO BOX 354690 PALM COAST, FL 32135-4690
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02082006No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-2477529	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CHIUMENTO, MICHAEL D III
4 OLD KINGS ROAD NORTH, SUITE B
PALM COAST, FL 32137

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____


Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HERRERA, EDWARD P.O. BOX 354690 PALM COAST, FL 321354690
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HAMANN, DARRELL P.O. BOX 354690 PALM COAST, FL 321354690
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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 Date _____ Daytime Phone # _____