2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000041214

Entity Name: BELLA LAND HOLDINGS, LLC

FILED Apr 17, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

344 TURKEYFOOT LAKE ROAD WEST 3730 TABS DRIVE AKRON, OH 44319 SUITE 4

UNIONTOWN, OH 44685

Current Mailing Address: New Mailing Address:

344 TURKEYFOOT LAKE ROAD WEST 3730 TABS DRIVE

AKRON, OH 44319 SUITE 4

UNIONTOWN, OH 44685

FEI Number: 20-2743010 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

GRADY LEE ELDER, III

4393 COMMONS DRIVE EAST
DESTIN, FL FL32541 US

RUNNELS, DAVAGE J III

4399 COMMONS DRIVE EAST
SUITE 300

DESTIN, FL FL32541 US

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: DAVAGE J RUNNELS III 04/17/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MEMB () Delete Title: MEMB (X) Change () Addition

Name:TUCKER, ROBERT MName:TUCKER, ROBERT MAddress:344 W TURKEYFOOT LAKE ROADAddress:3730 TABS DRIVE, SUITE 4City-St-Zip:AKRON, OH 44319City-St-Zip:UNIONTOWN, OH 44685

Title: MEMB () Delete Title: MEMB (X) Change () Addition Name: HARVEY, TIMOTHY S Name: HARVEY, TIMOTHY S

Address: 5696 CANTERBURY ROAD Address: 3730 TABS DRIVE, SUITE 4
City-St-Zip: AKRON, OH 44319 City-St-Zip: UNIONTOWN, OHIO, OH 44685

Title: MEMB () Delete Title: () Change () Addition

 Name:
 DP ROSSI INVESTMENTS,
 Name:

 Address:
 623 CALHOUN AVENUE
 Address:

 City-St-Zip:
 DESTIN, FL 32541
 City-St-Zip:

Title: MEMB () Delete Title: () Change () Addition

 Name:
 ELDER III, GRADY LEE
 Name:

 Address:
 69 COUNTRY CLUB DRIVE
 Address:

 City-St-Zip:
 DESTIN, FL 32541
 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: TIMOTHY HARVEY MEM 04/17/2008