

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000098899

Entity Name: BELMONT ESTATES, LLC

FILED  
Apr 27, 2008  
Secretary of State

## Current Principal Place of Business:

10105 WILD QUAIL DRIVE  
PORT ST. LUCIE, FL 34989

## New Principal Place of Business:

7103 MAIDSTONE DRIVE  
PORT ST. LUCIE, FL 34989

## Current Mailing Address:

10105 WILD QUAIL DRIVE  
PORT ST. LUCIE, FL 34989

## New Mailing Address:

7103 MAIDSTONE DRIVE  
PORT ST. LUCIE, FL 34989

FEI Number: 41-2186449

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MASSIMO, TRIPODI  
10105 WILD QUAIL DR.  
PORT ST.LUCIE, FL 34986 US

## Name and Address of New Registered Agent:

MASSIMO, TRIPODI  
7103 MAIDSTONE DRIVE  
PORT ST.LUCIE, FL 34986 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:

04/27/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: D ( ) Delete  
Name: STEPHEN, ALTRO R  
Address: 10105 WILD QUAIL DR.  
City-St-Zip: PORT ST.LUCIE, FL 34986 US

## ADDITIONS/CHANGES:

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: STEPHEN R. ALTRO

D

04/27/2008

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