2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 21, 2008
Secretary of State

DOCUMENT# L06000000312

Entity Name: BELLEZZA SHOPPES OF BONITA, LLC

Current Principal Place of Business:

19350 NW 123RD CT.
MICANOPY, FL 32667

New Principal Place of Business:

Current Mailing Address:

19350 NW 123RD CT.
MICANOPY, FL 32667

New Mailing Address:

FEI Number: 20-4336989 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KARPAN, JULIE
19350 NW 123RD CT.
MICANOPY, FL 32667 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:	HOLLY, JERRY	
Address:	19350 NW 123RD CT.	
City-St-Zip:	MICANOPY, FL 32667	
Title:	MGRM	( ) Delete
Name:	BARBER, ROBERT DR	
Address:	11339 HWY 326	
City-St-Zip:	OCALA, FL 34482	
Title:	MGRM	( ) Delete
Name:	BARBER, MICHELLE	
Address:	11339 HWY 326	
City-St-Zip:	OCALA, FL 32667	
Title:	MGRM	( ) Delete
Name:	ISHIKAWA, EILEEN V	
Address:	19350 NW 123 CRT	
City-St-Zip:	MICANOPY, FL 32667	
Title:	MGRM	( ) Delete
Name:	KARPAN, JULIE M	
Address:	19350 NW 123 CRT	
City-St-Zip:	MICANOPY, FL 32667	

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:	
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: JULIE M. KARPAN MGRM 01/21/2008

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