

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000016928

Entity Name: BELLA PROPERTY LLC

FILED  
Mar 10, 2009  
Secretary of State

**Current Principal Place of Business:**

100 MASTERS DRIVE  
ST AUGUSTINE, FL 32084

**New Principal Place of Business:**

**Current Mailing Address:**

100 MASTERS DRIVE  
ST AUGUSTINE, FL 32084

**New Mailing Address:**

FEI Number: 20-4316829

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BROWN, RONALD  
4112 PINE RUN CIRCLE  
ST AUGUSTINE, FL 32086 US

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

WILSON, TODD B  
100 MASTERS DRIVE  
ST AUGUSTINE, FL 32084 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: TODD B. WILSON

03/10/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: BROWN, RONALD  
Address: 4112 PINE RUN CIRCLE  
City-St-Zip: ST AUGUSTINE, FL 32086

Title: MGRM ( ) Delete  
Name: WILSON, TODD  
Address: 100 MASTERS DRIVE  
City-St-Zip: ST AUGUSTINE, FL 32084

Title: MGRM (X) Delete  
Name: WILSON, BRENDA  
Address: 100 MASTERS DRIVE  
City-St-Zip: ST AUGUSTINE, FL 32084

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: WILSON, TODD B  
Address: 100 MASTERS DRIVE  
City-St-Zip: ST AUGUSTINE, FL 32084

Title: MGRM (X) Change ( ) Addition  
Name: WILSON, BRENDA C  
Address: 100 MASTERS DRIVE  
City-St-Zip: ST AUGUSTINE, FL 32084

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: BRENDA C. WILSON

MGRM

03/10/2009

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