

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000000500

**FILED**  
**Apr 17, 2008**  
**Secretary of State**

**Entity Name:** BELL UNIVERSITY VILLAGE, LLC

**Current Principal Place of Business:**

300 N GREENE ST.,  
SUITE 1000  
GREENSBORO, NC 27401

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 3288  
GREENSBORO, NC 27402

**New Mailing Address:**

FEI Number: 20-0387262

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STEVEN D. BELL & COMPANY  
BARRINGTON TERRACE, ATTN  
333 16TH AVENUE SE  
LARGO, FL 33771 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: BELL, STEVEN D  
Address: 300 N GREENE ST., SUITE 1000  
City-St-Zip: GREENSBORO, NC 27401

**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: STEVEN D BELL

MGR

04/17/2008

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