

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000076787

FILED
Apr 27, 2008
Secretary of State

Entity Name: BELLEVIEW HOLDING COMPANY

Current Principal Place of Business:

5507 SE 111TH STREET
BELLEVIEW, FL 34420 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 99
BELLEVIEW, FL 34421-009 US

New Mailing Address:

PO BOX 2461
BELLEVIEW, FL 34421-009 US

FEI Number: 30-0317851

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUNHAM, LINDA
12907 SE 30TH COURT
BELLEVIEW, FL 34420 US

Name and Address of New Registered Agent:

HADDAD, RAMI
5507 SE 111TH ST
BELLEVIEW, FL 34420 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: RAMI HADDAD

04/27/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: DUNHAM, LINDA
Address: 12907 SE 30TH COURT
City-St-Zip: BELLEVIEW, FL 34420 US

Title: DVPT () Delete
Name: HADDAD, RAMI
Address: 25 SE OLIVE CIRCLE
City-St-Zip: OCALA, FL 34472 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAMI HADDAD

DVPT

04/27/2008

Electronic Signature of Signing Officer or Director

Date