

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000064074

FILED  
Apr 10, 2007  
Secretary of State

Entity Name: BELLA GARDEN, INC.

## Current Principal Place of Business:

6022 PALOMA GLADE DRIVE  
LITHIA, FL 33547

## New Principal Place of Business:

5668 FISHHAWK CROSSING BLVD  
LITHIA, FL 33547

## Current Mailing Address:

6022 PALOMA GLADE DRIVE  
LITHIA, FL 33547

## New Mailing Address:

5668 FISHHAWK CROSSING BLVD  
LITHIA, FL 33547

FEI Number: 20-4845605

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BASURTO, MARK A  
220 S. FRANKLIN STREET  
TAMPA, FL 33602 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES ( ) Change (X) Addition  
Name: RECKTENWALD, STACEY A  
Address: 15429 MARTIN MEADOW DR  
City-St-Zip: LITHIA, FL 33547 US

Title: VP ( ) Change (X) Addition  
Name: MALEC, MARIA R  
Address: 6022 PALOMA GLADE DR  
City-St-Zip: LITHIA, FL 33547 US

Title: SEC ( ) Change (X) Addition  
Name: MALEC, STEVE  
Address: 6022 PALOMA GLADE DR  
City-St-Zip: LITHIA, FL 33547 US

Title: TRES ( ) Change (X) Addition  
Name: RECKTENWALD, THOMAS  
Address: 15429 MARTIN MEADOW DR  
City-St-Zip: LITHIA, FL 33547 US

I hereby certify that the information supplied with this filing does not qualify for the 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: MARIA R MALEC

VP

04/10/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date