

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000064074

Entity Name: BELLA GARDEN, INC.

FILED
Feb 13, 2009
Secretary of State

Current Principal Place of Business:

5664 FISHHAWK CROSSING BLVD
LITHIA, FL 33547

New Principal Place of Business:

Current Mailing Address:

5664 FISHHAWK CROSSING BLVD
LITHIA, FL 33547

New Mailing Address:

FEI Number: 20-4845605

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSH ROSS REGISTERED AGENT SERVICES, LLC
1801 NORTH HIGHLAND AVENUE
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: PRES () Delete
Name: RECKTENWALD, STACEY A
Address: 15429 MARTIN MEADOW DR
City-St-Zip: LITHIA, FL 33547 US

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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

02/13/2009

Electronic Signature of Signing Officer or Director

Date