2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000147964

Entity Name: BELLADAGIO HOLDINGS, INC.

FILED May 01, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13555 PERDIDO KEY DRIVE PERDIDO KEY, FL 32507

Current Mailing Address: New Mailing Address:

P. O. BOX 902 P. O. BOX 738

POINT CLEAR, AL 36564 POINT CLEAR, AL 36564

FEI Number: 20-5956066 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SMITH, G. THOMAS MCBRIDE, MARK A
510 E. ZARAGOZA STREET 13555 PERDIDO KEY DRIVE

PENSACOLA, FL 32502 US 13555 PERDIDO KEY DRIVE PERDIDO KEY, FL 32507 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: MARK A. MCBRIDE 05/01/2008

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: MCBRIDE, MARK A Name: MCBRIDE, MARK A

Address: P. O. BOX 902 Address: P. O. BOX 738
City-St-Zip: POINT CLEAR, AL 36564 City-St-Zip: POINT CLEAR, AL 36564

Title: S () Delete Title: S (X) Change () Addition Name: MCBRIDE, MARK A Name: MCBRIDE, MARK A

 Address:
 P. O. BOX 902
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 P. O. BOX 738

 City-St-Zip:
 POINT CLEAR, AL 36564
 City-St-Zip:
 POINT CLEAR, AL 36564

Title: T () Delete Title: T (X) Change () Addition

 Name:
 MCBRIDE, MARK A
 Name:
 MCBRIDE, MARK A

 Address:
 P. O. BOX 902
 Address:
 P. O. BOX 738

City-St-Zip: POINT CLEAR, AL 36564 City-St-Zip: POINT CLEAR, AL 36564

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: MARK A. MCBRIDE PRES 05/01/2008