

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000001110

**Entity Name:** BELLA GROUP, A PRIVATE FOUNDATION, INC.

**Current Principal Place of Business:**

122 N. MCKENNA AVENUE, #100  
ATTN: MICHAEL E. WILCOX  
GRETNA, NE 68028

**Current Mailing Address:**

122 N. MCKENNA AVENUE, #100  
ATTN: MICHAEL E. WILCOX  
GRETNA, NE 68028 US

**FEI Number: 27-1838614**

**Certificate of Status Desired: No**

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

ZIMMERMAN, NEVIN J  
221 MCKENZIE AVE  
PANAMA CITY, FL 32401 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:** NEVIN J. ZIMMERMAN

04/15/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, PRESIDENT  
Name WILCZEWSKI, EDWARD E  
Address 22851 NO. 54TH STREET  
City-State-Zip: PHOENIX AZ 85054

Title DIRECTOR, TREASURER  
Name WILCOX, MICHAEL E  
Address 122 N. MCKENNA AVENUE, #100  
City-State-Zip: GRETNA NE 68028

Title DIRECTOR, VP, SECRETARY  
Name MCALEER, DEBORAH  
Address 22851 NO. 54TH STREET  
City-State-Zip: PHOENIX AZ 85054

Title DIRECTOR  
Name BRADFORD III, D.C.  
Address 6457 FRANCES STREET #100  
City-State-Zip: OMAHA NE 68107

Title DIRECTOR  
Name WILCZEWSKI, MARK  
Address 2632 SE TEAL AVENUE  
City-State-Zip: GRESHAM OR 97080

Title DIRECTOR  
Name WILCZEWSKI, MICHAEL  
Address 3809 S. HWS CLEVELAND  
BOULEVARD  
City-State-Zip: OMAHA NE 68130

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** EDWARD E. WILCZEWSKI

PRESIDENT/DIRECTOR

04/15/2022

Electronic Signature of Signing Officer/Director Detail

Date