2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000013005

Entity Name: BIB, LLC

FILED May 29, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2050 JAMAICA WAY PUNTA GORDA, FL 33950 **Current Mailing Address: New Mailing Address:** 2050 JAMAICA WAY PUNTA GORDA, FL 33950 FEI Number: 81-0610539 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MCATEE, KAREN F 2050 JAMAICA WAY PUNTA GORDA, FL 33950 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete MCATEE, DAVID Name: Name: 2050 JAMAICA WAY Address: Address: City-St-Zip: PUNTA GORDA, FL 33950 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MCATEE, KAREN Name: Name: Address: 2050 JAMAICA WAY Address: City-St-Zip: PUNTA GORDA, FL 33950 City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change () Addition QUINN, JAMES QUINN, JAMES Name: Name: Address: 2310 VIA VENICE Address: 2608 RIO PLATO DR City-St-Zip: PUNTA GORDA, FL 33950 City-St-Zip: PUNTA GORDA, FL 33950 () Delete Title: MGRM Title: MGRM (X) Change () Addition Name: OKOMSKI, CHARLENE Name: OKOMSKI, CHARLENE 2310 VIA VENICE Address: Address: 2608 RIO PLATO DR City-St-Zip: PUNTA GORDA, FL 33950 City-St-Zip: PUNTA GORDA, FL 33950 Title: MGRM () Delete Title: MGRM (X) Change () Addition WYNN, KATHY GUARINO, MAUREEN Name: Name: 3972 CROOKED ISLAND DR. 3968 CROOKED ISLAND DR. Address: Address: City-St-Zip: PUNTA GORDA, FL 33950 City-St-Zip: PUNTA GORDA, FL 33950 Title: () Delete Title: () Change (X) Addition GUARINO, JOHN Name: Name: Address: Address: 3968 CROOKED ISLAND DR. PUNTA GORDA, FL 33950 City-St-Zip: 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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KAREN MCATEE RA 05/29/2007