

**2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000089290

**FILED  
Jan 05, 2010  
Secretary of State**

**Entity Name:** B & D CIF, LLC

**Current Principal Place of Business:**

177 ROBIN HOOD CIRCLE  
104  
NAPLES, FL 34104

**New Principal Place of Business:**

**Current Mailing Address:**

177 ROBIN HOOD CIRCLE  
104  
NAPLES, FL 34104

**New Mailing Address:**

**FEI Number:** 26-3384511      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

TAX & ACCOUNTING OF SW FL, LLC  
809 WALKERBILT ROAD  
6  
NAPLES, FL 34135 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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** FARRELL, BRUCE  
**Address:** 177 ROBIN HOOD CIRCLE, UNIT 104  
**City-St-Zip:** NAPLES, FL 34104

I hereby 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: BRUCE S. FARRELL      MGR      01/05/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date