## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000021472

Entity Name: BHH LEASING #3, LLC

FILED Apr 08, 2008 Secretary of State

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

10100-B AILERON AVENUE 10100 AILERON AVENUE PENSACOLA, FL 32506 PENSACOLA, FL 32506

Current Mailing Address: New Mailing Address:

10100-B AILERON AVENUE 10100 AILERON AVENUE PENSACOLA, FL 32506 PENSACOLA, FL 32506

FEI Number: 54-2169688 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

BROWN, THOMAS A

14838 INNERARITY PT ROAD
PENSACOLA, FL 32507 US

BROWN, THOMAS A

14838 INNERARITY POINT ROAD
PENSACOLA, 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: THOMAS A. BROWN 04/08/2008

Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRP ( ) Delete Title: MGRP (X) Change ( ) Addition Name: BROWN, THOMAS A Name: BROWN, THOMAS A

Address: 14838 INNERARITY PT ROAD Address: 14838 INNERARITY POINT ROAD City-St-Zip: PENSACOLA, FL 32507 City-St-Zip: PENSACOLA, FL 32507

Title: S () Delete Title: () Change () Addition

 Name:
 LANE, JOHN H
 Name:

 Address:
 311 WOODBINE DRIVE
 Address:

 City-St-Zip:
 PENSACOLA, FL 32503
 City-St-Zip:

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

 Name:
 BROWN, MICHAEL C
 Name:
 BROWN, MICHAEL C

 Address:
 401 COLBERT AVE
 Address:
 401 COLBERT AVENUE

 City-St-Zip:
 PENSACOLA, FL 32507
 City-St-Zip:
 PENSACOLA, FL 32507

 Name:
 BROWN, PATRICK F
 Name:
 BROWN, PATRICK F

 Address:
 400 COLBERT AVE
 Address:
 400 COLBERT AVENUE

 City-St-Zip:
 PENSACOLA, FL 32507
 City-St-Zip:
 PENSACOLA, FL 32507

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: JOHN H. LANE S 04/08/2008