LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 04, 2003 8:00 am
Secretary of State
09-04-2003 90037 002 ****50.00

DOCUMENT # L00000003339

1. Entity Name

BT Financial, LLC

DO NOT WRITE IN THIS SPACE

90154014

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
172 Cameron Drive	172 Cameron Drive
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Weston, Florida	City & State: Weston, Florida
Zip: 33326 Country: United States	Zip: 33326 Country: United States

4. FEI Number 650992641 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: American Information Services, Inc.

Street Address (P.O. Box Number is Not Acceptable)

350 E. Las Olas Boulevard, Suite 1600

City: Fort Lauderdale FL Zip Code: 33301

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable.

FEE IS $50.00
Make Check Payable to Florida Department of State
DUE BY MAY 1

9. MANAGING MEMBERS / MANAGERS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: Bruce Liebman, MGRM 172 Cameron Drive Weston, Florida 33326	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP: Todd Liebman, MGRM 10 Birch Meadow Circle Framingham, MA 01701	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	**DO NOT WRITE IN THIS SPACE**
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	

CR2E083B (12/02)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 Liebman 9/2/03 (954) 759-8951
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

attachment

901514014
#L00000003339

Akerman Senterfitt
ATTORNEYS AT LAW

Fort Lauderdale
Jacksonville
Miami
Orlando
Tallahassee
Tampa
West Palm Beach

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Fort Lauderdale, Florida 33301-2229
www.akerman.com
954 463 2700 *tel* 954 463 2224 *fax*

September 2, 2003

Janet L. LaPointe, Paralegal
954 759 8957
jlapointe@akerman.com

Florida Department of State
Division of Corporations
P.O. Box 6478
Tallahassee, FL 32314

Re: BT Financial, LLC Annual Report
Document #L00000003339

Dear Madam/Sir:

Enclosed for filing on behalf of the above entity is an original executed 2003 Limited Liability Company Uniform Business Report, together with a check in the amount of $50.00 representing the filing fee.

Sincerely,

AKERMAN SENTERFITT

Janet L. LaPointe,
Paralegal

cc: Bruce Liebman