

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000027493

Entity Name: BFZ LEASING, LLC**Current Principal Place of Business:**1550 SOUTH OCEAN LANE
UNIT 201
FT. LAUDERDALE, FL 33316**Current Mailing Address:**226 MAIN STREET
P.O. BOX 6910
FLORENCE, KY 41022 US**FEI Number:** APPLIED FOR**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MOORE, SEAN L
2900 EAST OAKLAND PARK BLVD.
3RD FLOOR
FT. LAUDERDALE, FL 33306 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**Authorized Person(s) Detail :**Title MGR
Name BUSALD, EDWARD A
Address 226 MAIN STREET
City-State-Zip: FLORENCE KY 41042Title MGR
Name ZEVELY, WILBUR M
Address 226 MAIN STREET
City-State-Zip: FLORENCE KY 41042Title MGR
Name MCMAIN, MICHAEL J
Address 226 MAIN STREET
City-State-Zip: FLORENCE KY 41042Title MGR
Name KATHMAN, WILLIAM JJR.
Address 226 MAIN STREET
City-State-Zip: FLORENCE KY 41042Title MGR
Name TRAVIS, BURR J
Address 226 MAIN STREET
City-State-Zip: FLORENCE KY 41042Title MGR
Name THOMPSON, GARY T
Address 226 MAIN STREET
City-State-Zip: FLORENCE KY 41042

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WILLIAM J KATHMAN JR

MANAGER

01/05/2017

Electronic Signature of Signing Authorized Person(s) Detail_____
Date