

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jan 24, 2008 8:00 am**  
**Secretary of State**

01-24-2008 90071 035 \*\*\*138.75

DOCUMENT # L00000003025

1. Entity Name  
BVCO, L.L.C.



Principal Place of Business  
8470 ENTERPRISE CIRCLE  
SUITE 201  
BRADENTON, FL 34202 US

Mailing Address  
8470 ENTERPRISE CIRCLE  
SUITE 201  
BRADENTON, FL 34202 US

60003662



01062008 Chg-LLC CR2E083 (12/06)

2. Principal Place of Business - No P.O. Box #  
1990 Main Street

3. Mailing Address  
1990 Main Street

Suite, Apt. #, etc.  
Suite 801

Suite, Apt. #, etc.  
Suite 801

City & State  
Sarasota, FL

City & State  
Sarasota, FL

4. FEI Number  
65-0993026

Applied For  
Not Applicable

Zip  
34236

Country

Zip  
34236

Country

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

## 6. Name and Address of Current Registered Agent

PFLUGNER, J.GEOFFREY  
8470 ENTERPRISE CIRCLE  
SUITE 201  
BRADENTON, FL 34202

## 7. Name and Address of New Registered Agent

Name  
Renea M. Glendinning, CPA

Street Address (P.O. Box Number is Not Acceptable)  
1990 Main Street, Suite 801

City  
Sarasota FL Zip Code  
34236

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 Renea M. Glendinning  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Make check payable to  
Florida Department of State

## 9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR  
PFLUGNER, J GEOFFREY  
8470 ENTERPRISE CIRCLE, SUITE 201  
BRADENTON, FL 34202 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR  
MYERS, T  
2033 MAIN ST., SUITE 600  
SARASOTA, FL 34237 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

## 10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR.  
Albino, George  
1990 Main Street, Suite 801  
Sarasota, FL 34236 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: George Albino  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date Jan 22 2008 Daytime Phone #