2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# _O	0000013	5°C	FILED	
1. Entity Name BMH REALTY, LLC			01 APR 30 PM L	÷ 56
		the second of th		
Principal Place of Business	Mailing Address	·	SECRETARY OF S TALLAHASSEE. FL	TATE Orina
		المراجعة ا	•	
2. Principal Place of Business 11 E. Midtown Park	3. Mailing Address	wn Park		
Suite, Apt. #, etc. Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE	
City & State	City & State		4. FEI Number	Applied For
Mobile, AL	Mobile, AL		63-1262210	Not Applicable
Zip Country USA	Z ip 36606	Country USA	5. Certificate of Status Desired	\$5.00 Additional Fee Required
6. Name and Address of Curre			7. Name and Address of New Registe	<u> </u>
Registered Agents Le	anl Corridos	Name .		
_		Street Addres	ss (P.O. Box Number is Not Acceptable)	
1333 North Duval Str				
Tallahassee, FL 3230	2			
		City		FL Zip Code
			·	· - 1
8. The above named entity submits this statem	nent for the purpose of changing	g its registered office or	registered agent, or both, in the State of F	orida.
SIGNATURE				
Signature, typed or printed name of re	agistered agent and title if applicable	. (NOTE: Registered	Agent signature required when reinstating)	DATE
	EILE NOW	III FEE IS \$50.00		
	Make Check Payabl		State	
PARALACINIC SAFA	BERS/MANAGERS	<u> </u>	ADDITIONS/CHANG	EC
9. MANAGING MEM TITLE Managing Member		TITLE	ADDITIONS/CHANG	Change Addition
NAME S. Felton Mitc	chell, Jr.	NAME		Change Addition Change Addition
STREET ADDRESS 11 E. Midtown		STREET ADDRESS CITY - ST - ZIP		
Mobile, AL 360	Delete Delete	TITLE		Change Addition
NAME	books	NAME	0000042	
STREET ADDRESS		STREET ADDRESS		0101109026
CITY - ST - ZIP	- Dalota	CITY - ST - ZIP		Change Addition
TITLE NAME	Delete	TITLE NAME		Change Addition
STREET ADDRESS		STREET ADDRESS		
CITY - ST - ZIP		CITY - ST - ZIP		C Observe C Addition
TITLE NAME	Delete	TITLE NAME		Change Addition
STREET ADDRESS		STREET ADDRESS		ı
CITY - ST - ZIP		CITY - ST - ZIP		
TITLE	Delete	TITLE		Change Addition
NAME STREET ADDRESS		NAME STREET ADDRESS		
CITY_ST-ZIP		CITY - ST - ZIP		
TITLE	Delete	TITLE		Change Addition
NAMF in STREET ADDRESS		NAME STREET ADDRESS		
CITY - ST - ZIP		CITY - ST - ZIP		
11. I hereby certify that the information supplied	with this filing does not qualify	for the exemption state	d in Section 119.07(3)(i), Florida Statutes.	further certify that the
information indicated on this report is true a manager of the limited liability company or t	and accurate and that my signal	ure shall have the same	e legal effect as if made under oath; that I a	m a managing member or
/ Carl	7	A AA	it as required by enapter ede, Florida Statt	160.
SIGNATURE: A. THE	In poulal	[של	04/25/01	334-476-4100
SIGNATURE. SIGNATURE AND TYPED OR PRINTED NAME OF	SIGNING MANAGING MEMBER, 1/	ANAGER, OR AUTHORIZ	ED REPRESENTATIVE Date	Daytime Phone #
STF FL32519F.1				