

2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
Feb 22, 2006 8:00 am
Secretary of State

02-22-2006 90111 003 ****50.00

DOCUMENT # L01000002014

1. Entity Name
BWFP II, LLC



Principal Place of Business
1000 UNIVERSAL STUDIOS PLAZA
BLDG 22A SUITE 247
ORLANDO, FL 32819

Mailing Address
P.O. BOX 530084
ORLANDO, FL 32853-0084

DO NOT WRITE IN THIS SPACE



02142006No Chg-LLC

CR2E083 (11/05)

4. FEI Number
59-3696359

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

WHITAGRE, WILLIAM L
1000 UNIVERSAL STUDIOS PLAZA
BUILDING 22A, SUITE 247
ORLANDO, FL 32819-7610

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IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
BLAIR WITCH FILM COMPANY
1000 U S P BLDG 22A SUITE 247
ORLANDO, FL 32819

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

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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: *Wm. L. Whitacre* Wm. L. WHITACRE MGR BLAIR WITCH FILM CO. 2/14/06 407963 1000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #