2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 22, 2007 08:00 AM
Secretary of State

DOCUMENT # L01000002899

1. Entity Name
BGZM LAND, LLC

Principal Place of Business	Mailing Address
1053 MAITLAND CENTER COMMONS SUITE 200 MAITLAND, FL 32751	PO BOX 916774 LONGWOOD, FL 32791-6774

01162007No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2687498
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GABBAI, DAVID A
1053 MAITLAND CENTER COMMONS
SUITE 200
MAITLAND, FL 32751

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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. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2007

UD00000598512
01/24/07-80080-007 50.00

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	ZARINSKY, STANLEY
STREET ADDRESS	PO BOX 916774
CITY-ST-ZIP	LONGWOOD, FL 327916774
TITLE	MGR
NAME	BROTMAN, LESTER
STREET ADDRESS	PO BOX 916774
CITY-ST-ZIP	LONGWOOD, FL 327916774
TITLE	MGR
NAME	MORSE, WILLIAM
STREET ADDRESS	PO BOX 916774
CITY-ST-ZIP	LONGWOOD, FL 327916774
TITLE	MGR
NAME	DAVID, GABBAI A
STREET ADDRESS	1053 MAITLAND CENTER COMMONS
CITY-ST-ZIP	MAITLAND, FL 32751
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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: Stanley Zarinsky STANLEY ZARINSKY, MANAGER 1/17/07 407-774-0774
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #