

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2004 8:00 am
Secretary of State

04-20-2004 90185 039 ****55.00

DOCUMENT # L01000004427					
1. Entity Name BDF I, LLC					
Principal Place of Business 800 LAUREL OAK DRIVE SUITE 600 NAPLES, FL 34108			Mailing Address 800 LAUREL OAK DRIVE SUITE 600 NAPLES, FL 34108		
2. Principal Place of Business 751 Giralda Court Suite, Apt. #, etc.		3. Mailing Address 751 Giralda Court Suite, Apt. #, etc.			
City & State Marco Island, FL		City & State Marco Island, FL		4. FEI Number 59-3711526	
Zip 34145		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent LADEMAN, CARRIE E ESQ. 3200 TAMiami TRAIL NORTH STE. 200 NAPLES, FL 34103			7. Name and Address of New Registered Agent Name: Michael L. Dubey Street Address (P.O. Box Number is Not Acceptable): 751 Giralda Court City: Marco Island FL Zip Code: 34145		
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: MICHAEL L. DUBEY DATE: 4/16/04 <small>(NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$50.00 Due by May 1, 2004		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE MGRM	NAME EQUITY VI INVESTMENTS & DEVELOPMENT INC.		TITLE MGRM	NAME Michael L. Dubey	
STREET ADDRESS 800 LAUREL OAK DRIVE	CITY-ST-ZIP NAPLES, FL 34108		STREET ADDRESS 751 Giralda Court	CITY-ST-ZIP Marco Island, FL 34145	
TITLE NAME	STREET ADDRESS CITY-ST-ZIP		TITLE NAME	STREET ADDRESS CITY-ST-ZIP	
<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: MICHAEL L. DUBEY			DATE: 4/16/04 (239) 642-0836		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					