

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000017966

FILED
May 13, 2004
Secretary of State

Entity Name: BAM, LLC

Current Principal Place of Business:

790 HARBOUR DR.
SUITE 2C
NAPLES, FL 34103 US

New Principal Place of Business:

Current Mailing Address:

790 HARBOUR DR.
SUITE 2C
NAPLES, FL 34103 US

New Mailing Address:

FEI Number: 59-3748006

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASSAAD, MIKE
790 HARBOUR DR.
SUITE 2C
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: P () Delete
Name: ASSAAD, MIKE
Address: 790 HARBOR DR. SUITE 2C
City-St-Zip: NAPLES, FL 34103

Title: V () Delete
Name: CORACE, BEN
Address: 790 HARBOR DR. SUITE 2C
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ASSAAD, MIKE
Address: 790 HARBOR DR. SUITE 2C
City-St-Zip: NAPLES, FL 34103

Title: MGRM (X) Change () Addition
Name: CORACE, BEN
Address: 790 HARBOR DR. SUITE 2C
City-St-Zip: NAPLES, FL 34103

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: MIKE ASSAAD

MGR

05/13/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date