

**LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 12, 2002 8:00 am**  
**Secretary of State**

05-12-2002 90577 035 \*\*\*\*55.00

DOCUMENT # L0100002015

1. Entity Name

B+B PROPERTIES, LLC

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

4027 Roberts Point Rd

Suite, Apt. #, etc.

3. Mailing Address

4027 Roberts Point Rd

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

SARASOTA

City & State

SARASOTA, FL

4. FEI Number

01-0626950

Applied For

Not Applicable

Zip

FL

Country

USA

Zip

34242

Country

USA

5. Certificate of Status Desired ☒

**\$5.00** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name R. JOHN COLE II P.A.

Street Address (P.O. Box Number is Not Acceptable)

46 N WASHINGTON BLVD

City SARASOTA

FL

Zip Code

34236

**DO NOT WRITE  
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.

SIGNATURE

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

DATE

**FEE IS \$50.00**

**Make Check Payable to Department of State  
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

MGRM  
CHARLES BURBOL  
4027 Roberts Point Rd.  
SARASOTA, FL 34242

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

MGRM  
SCOTT BARRETT  
4027 ROBERTS POINT RD  
SARASOTA, FL 34242

TITLE  
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STREET ADDRESS  
CITY - ST - ZIP

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**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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

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

CHARLES BURBOL  
MGRM

Date

4/29/02 (941) 349-2652

Daytime Phone #

CR2E083B (12/01)