#### 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

#### **DOCUMENT # L01000022293**

1. Entity Name B I HOLDING, LLC



Principal Place of Business

10935 SE 177TH PLACE #305 SUMMERFIELD, FL 34491

Mailing Address

PO BOX 8670

PRAIRIE VILLAGE, KS 66208

## **FILED** Mar 22, 2005 8:00 am Secretary of State

03-22-2005 90182 015 \*\*\*\*55.00

20023603

01072005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 45-1948107

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent.

FIRST AMERICAN INTERNATIONAL INC 10935 SE 177TH PLACE #305 SUMMERFIELD, FL 34491

## 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. I am familiar with, and a the obligations of registered agent.						
SIGNATURE_	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered	Agent signature required whi	no reinstativo)	DATE	
D	iling Fee is \$50.00 ue by May 1, 2005					
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS  MGRM REINTJES, STEVE 6412 HIGH DRIVE SHAWNEE MISSION, KS 66208					
TITLE						F

# DO NOT WRITE IN THIS SPACE

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY+ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7/P

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:

3/17/1 352-245-5090.