



**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 12, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000004167 1. Entity Name BWLK PROPERTIES, LLC	
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Principal Place of Business 13041-1 MCGREGOR BLVD. FORT MYERS, FL 33919	Mailing Address 13041-1 MCGREGOR BLVD. FORT MYERS, FL 33919
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DO NOT WRITE IN THIS SPACE


01242004 No Chg-LLC CR2E083 (10/03)
4. FEI Number
43-1950927
5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent
**WHITAKER, SCOTT C
13041-1 MCGREGOR BLVD.
FORT MYERS, FL 33919**

**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 accept the obligations of registered agent.
SIGNATURE _____ (NOTE: Registered Agent signature required when restate) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM WHITAKER, SCOTT C 13041-1 MCGREGOR BLVD. FORT MYERS, FL 33919
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM BEAN, WILLIAM E 13041-1 MCGREGOR BLVD. FORT MYERS, FL 33919
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM LUTZ, JOSEPH L 13041-1 MCGREGOR BLVD. FORT MYERS, FL 33919
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM KAREH, AHMAD R 13041-1 MCGREGOR BLVD. FORT MYERS, FL 33919
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	

**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)(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:  **SCOTT C. WHITAKER** 4-9-04 239-481-1331
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #