2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 08, 2004
Secretary of State

DOCUMENT# L02000009630

Entity Name: BBS VENTURES, LLC

Current Principal Place of Business:

265 SEAWINDS DR
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

Current Mailing Address:

265 SEAWINDS DR
SANTA ROSA BEACH, FL 32459

New Mailing Address:

FEI Number: 32-0012639 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHMITT, GREGORY D
265 SEAWINDS DR
SANTA ROSA BEACH, FL 32459 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: MGRM ( ) Delete
Name: SCHMITT, GREGORY D
Address: 224 STINSON DRIVE
City-St-Zip: DEFUNIAK SPRINGS, FL 32433

Title: MGRM ( ) Delete
Name: BRUNSON, RICHARD L
Address: 1760 OSPREY COVE
City-St-Zip: NICEVILLE, FL 32578

Title: MGRM ( ) Delete
Name: BRUNER, ADLEE G
Address: 66 SAWMILL ROAD
City-St-Zip: BRUCE, FL 32455

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: SCHMITT, GREGORY D
Address: 265 SEAWINDS DRIVE
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: GREGORY SCHMITT MGRM 04/08/2004

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