

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 02, 2007 08:00 AM
Secretary of State

DOCUMENT # L02000014617 1. Entity Name BC HUNTER/BC FISHERMAN, LLC	
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Principal Place of Business P.O. BOX 2240 LAND O'LAKES, FL 34639	Mailing Address P.O. BOX 2240 LAND O'LAKES, FL 34639
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DO NOT WRITE IN THIS SPACE



04302007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 02-0617835	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent BOHN, RODNEY C 6820 SOMBRAS WAY LAND O LAKES, FL 34637	DO NOT WRITE IN THIS SPACE
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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 reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00
Due by May 1, 2007**

U00000757572
05/23/07-80076-010 55.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BOHN, ADAM L 24410 ROLLING VIEW COURT LUTZ, FL 33559
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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 exemptions contained in Chapter 119, 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: *Robert A. Bohn* Secretary 4-30-2007 813-340-0921
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #