## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000019001

Entity Name: BF AT WINDWARD, LLC

**FILED** Sep 02, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2901 SW 8TH ST., STE. 204 1200 PONCE DE LEON BLVD. MIAMI, FL 33135

FIRST FLOOR

CORAL GABLES, FL 33134

**Current Mailing Address:** New Mailing Address:

2901 SW 8TH ST., STE. 204 1200 PONCE DE LEON BLVD. FIRST FLOOR MIAMI, FL 33135

CORAL GABLES, FL 33134

FEI Number: 06-1641625 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BOSCHETTI, JOSE R BOSCHETTI, JOSE R 1200 PONCÉ DE LEON BLVD. 2901 SW 8TH STE 204 FIRST FLOOR MIAMI, FL 33135

CORAL GABLES, FL 33134 US

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: JOSE R BOSCHETTI 09/02/2005

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGR Title: () Delete (X) Change ( ) Addition

BOSCHETTI, JOSE R BOSCHETTI, JOSE R Name: Name:

Address: 2901 SW 8TH ST., STE. 204 Address: 1200 PONCE DE LEON BLVD., FIRST FLOOR City-St-Zip: MIAMI, FL 33135 City-St-Zip: CORAL GABLES, FL 33134

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition

BOSCHETTI, LUIS R Name: Name: BOSCHETTI, LUIS R

Address: 2901 SW 8ST STE 204 Address: 1200 PONCE DE LEON BLVD., FIRST FLOOR

City-St-Zip: MIAMI, FL 33135 City-St-Zip: CORAL GABLES, FL 33134

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: JOSE R BOSCHETTI 09/02/2005