2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 19, 2005
Secretary of State

DOCUMENT# L02000034284

Entity Name: BMV INSURANCE GROUP, L.L.C.

Current Principal Place of Business:

420 S.E. 8TH STREET
OCALA, FL 34471

New Principal Place of Business:

Current Mailing Address:

420 S.E. 8TH STREET
OCALA, FL 34471

New Mailing Address:

FEI Number: 05-0546542 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCDONALD, JOHN M
420 S.E. 8TH STREET
OCALA, FL 34471 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:	MGR	( ) Delete
Name:	MCDONALD, JOHN M	
Address:	420 S.E. 8TH STREET	
City-St-Zip:	OCALA, FL 34471	
Title:	MGRM	( ) Delete
Name:	BRANTLEY, JOHN W III	
Address:	3308 S.E. 18TH COURT	
City-St-Zip:	OCALA, FL 34471	
Title:	MGRM	( ) Delete
Name:	VANALLEN, LINDA C	
Address:	P.O. BOX 583	
City-St-Zip:	INVERNESS, FL 34451	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: JOHN M. MCDONALD MGR 01/19/2005

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