## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## Jan 24, 2005 08:00 AM Secretary of State **DOCUMENT # L03000022398** 1. Entity Name B.K. DEVCO, L.L.C. Principal Place of Business Mailing Address 2190 J&C BOULEVARD 2190 J&C BOULEVARD NAPLES, FL 34109 NAPLES, FL 34109 01192005No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0119558 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent HEUERMAN, PAUL K DO NOT WRITE C/O ROETZEL & ANDRESS 850 PARK SHORE DRIVE, THIRD FLOOR IN THIS SPACE NAPLES, FL 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. (am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title il applicable (NOTE, Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS g. TITLE MULLERSMAN, STEVEN J NAME STREET ADDRESS 2190 J&C BOULEVARD NAPLES, FL 34109 CITY-ST-71P TITLE NAME U000001**9**4361 01/25/05-80099-003 50.00 STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP SITLE NAME STREET ADDRESS CITY-ST-ZIP 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: 3 to 10 PRINTED IN PRI

**FILED**