

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 10, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # L03000025121

1. Entity Name  
BG LAND, LLC



Principal Place of Business  
2603B MAITLAND CENTER PARKWAY  
MAITLAND, FL 32751

Mailing Address  
2603B MAITLAND CENTER PARKWAY  
MAITLAND, FL 32751



01202005 No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-0080807

Applied For  
Not Applicable

5. Certificate of Status Desired

☐ \$5.00 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

BERMAN, REID S  
2603B MAITLAND CENTER PARKWAY  
MAITLAND, FL 32751

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00**  
**Due by May 1, 2005**

000000224425  
02/10/05-80087-012 55.00

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	BERMAN, REID S
STREET ADDRESS	2603B MAITLAND CENTER PARKWAY
CITY-ST-ZIP	MAITLAND, FL 32751
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone # ext. 113