

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000033324

FILED  
Apr 29, 2005  
Secretary of State

Entity Name: BCC, LLC

## Current Principal Place of Business:

23446 LINKS DR.  
BROOKSVILLE, FL 34601

## New Principal Place of Business:

## Current Mailing Address:

23446 LINKS DR.  
BROOKSVILLE, FL 34601

## New Mailing Address:

FEI Number: 13-4265532

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BRONSON, THOMAS E  
24060 DEER RUN RD.  
BROOKSVILLE, FL 34601 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: JOHNSTON, DARRYL  
Address: 10123 WEEKS DRIVE  
City-St-Zip: BROOKSVILLE, FL 34601

Title: MGR ( ) Delete  
Name: WALDRON, DIANE  
Address: P.O. BOX 1750  
City-St-Zip: BROOKSVILLE, FL 34605

Title: MGR ( ) Delete  
Name: BUCKNER, ROBERT  
Address: 11 N.MAIN ST  
City-St-Zip: BROOKSVILLE, FL 34601

Title: MGR ( ) Delete  
Name: BROWN, DONALD  
Address: 9321 WALLIEN DR  
City-St-Zip: BROOKSVILLE, FL 34601

Title: MGR ( ) Delete  
Name: BEASLEY, PAUL  
Address: P.O. BOX 506  
City-St-Zip: BROOKSVILLE, FL 34605

Title: MGR ( ) Delete  
Name: STEWART, PETE  
Address: 10110 KIMBROUGH DR  
City-St-Zip: BROOKSVILLE, FL 34601

## ADDITIONS/CHANGES:

Title: PRES (X) Change ( ) Addition  
Name: JOHNSTON, DARRYL  
Address: 10123 WEEKS DRIVE  
City-St-Zip: BROOKSVILLE, FL 34601

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: SANDER, RICH  
Address: 5328 FLORENTINE CT  
City-St-Zip: SPRING HILL, FL 34608

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: DARRYL JOHNSTON

PRES

04/29/2005

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