2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 31, 2006 08:00 AM **DOCUMENT # L03000033508 Secretary of State** 1. Entity Name BCMR, LLC Principal Place of Business Mailing Address 6818 BAYSHORE RD. 6818 BAYSHORE RD. PALMETTO, FL 34221 PALMETTO, FL 34221 01182006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0334760 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE BARNES, GARRET TES BARNES WALKER, CHARTERED 3119 MANATEE AVE. WEST IN THIS SPACE BRADENTON, FL 34205 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 egent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 9. MGR TITLE WOODRING, ROBERT A SR. NAME STREET ADDRESS 6818 BAYSHORE RD. CITY-ST-ZIP PALMETTO, FL 34221 na/11/150.00 na/11/16=90006=015 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ACCRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. 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 eath, that I am a managing member or manager of the ilmited liability company or the receiver or trusted empowered by execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS C177-57-21P