

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000034967

Entity Name: BMR HOLDINGS LLC

FILED
Apr 19, 2006
Secretary of State

Current Principal Place of Business:

13770 58TH ST N. STE 318
CLEARWATER, FL 33760

New Principal Place of Business:

13770 58TH ST N.
STE 318
CLEARWATER, FL 33760

Current Mailing Address:

13770 58TH ST N. STE 318
CLEARWATER, FL 33760

New Mailing Address:

13770 58TH ST N.
STE 318
CLEARWATER, FL 33760

FEI Number: 20-0229644

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANTHONY, JAMES
2517 SKIPPER TRAIL
CLEARWATER, FL 33761 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/MANAGERS:

Title: MGRM () Delete
Name: LEVICH, MICHAEL
Address: 12009 MARBLEHEAD DRIVE
City-St-Zip: TAMPA, FL 33626

Title: MGR () Delete
Name: ANTHONY, JAMES
Address: 2517 SKIPPER TRAIL
City-St-Zip: CLEARWATER, FL 33761

Title: MGR () Delete
Name: MAUREEN, JACK
Address: 8606 WHITE SPRING DR.
City-St-Zip: NEW PORT RILHEY, FL 36455

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 Chapter 119, 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: JAMES ANTHONY

MGR

04/19/2006

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