

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

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FILED

2005 MAY -5 PM 12: 07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



05022005No Chg-LLC

CR2E083 (10/03)

4. FEI Number  
74-3106791

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

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

RUTLAND, DONALD  
10065 EMERALD COAST PARKWAY, WEST, STE C-4  
DESTIN, FL 32550

**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 naming.)

DATE

**Filing Fee is \$50.00  
Due by September 7, 2005**

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGR
NAME	BMBI HOLDINGS, LLC
STREET ADDRESS	10065 EMERALD COAST PKWY, WEST, C-201
CITY-ST-ZIP	DESTIN, FL 32550
TITLE	MGR
NAME	WILLIS, KRENKEL & MACLIN PROPERTIES, LLC
STREET ADDRESS	56 SPIRES LANE, SUITE 13-A
CITY-ST-ZIP	SANTA ROSA BEACH, FL 32459
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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**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)(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:**

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

5-3-05 8806229150

Date

Daytime Phone #