2007 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

FILED Apr 16, 2007 08:00 A Secretary of State **DOCUMENT # L03000035110** 1. Entity Name BD PROPERTIES, L.L.C. Principal Place of Business Mailing Address **1634 ARABIAN LANE 1634 ARABIAN LANE** PALM HARBOR, FL 34685 PALM HARBOR, FL 34685 03202007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 56-2410400 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SADORF, RICK W DO NOT WRITE 2201 NORTHEAST COACHMAN RD., STE. 102 CLEARWATER, FL 33765 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. (NOTE, Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. Filing Fee is \$50.00 Due by May 1, 2007 U00000707307 04/24/07-30070-010 50.00 MANAGING MEMBERS/MANAGERS 9. TITLE **MGRM** BERGER, HAROLD F 1634 ARABIAN LANE STREET ADDRESS PALM HARBOR, FL 34685 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE

11. I hereby certify that the information supplied with this filing 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 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.

E AND TYPED OR PRINTED NAME OF

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS