


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 21, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000038515 1. Entity Name BDG TOWNHOMES, LLC	
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Principal Place of Business 13907 CARROLLWOOD VILLAGE LN TAMPA, FL 33618	Mailing Address 13014 N. DALE MABRY HWY SUITE 356 TAMPA, FL 33618
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04182005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 20-0734221	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent COCKEY, PRESTON O JR. 201 N FRANKLIN ST., STE. 2200 TAMPA, FL 33602	DO NOT WRITE IN THIS SPACE
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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 re-stating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2005**

000000320509
04/21/05-80039-017 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ZAPPAPORT, ALEXANDER G 13014 N. DALE MABRY HWY, STE 356 TAMPA, FL 33618
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR NOWAK, GREG 6654 78TH AVE NORTH PINELLAS PARK, FL 33781
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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: *Alexander G Zappaport* 4-18-05 813-269-0899
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #