

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jun 10, 2004 8:00 am**  
**Secretary of State**

05-03-2004 90119 031 \*\*\*\*55.00

<b>DOCUMENT # L03000046486</b>					
<b>1. Entity Name</b> BBD WESLEY CHAPEL LLC					
<b>Principal Place of Business</b> 777 S. FLAGLER DRIVE C/O THE GOODMAN COMPANY WEST PALM BEACH, FL 33401			<b>Mailing Address</b> 777 S. FLAGLER DRIVE C/O THE GOODMAN COMPANY WEST PALM BEACH, FL 33401		
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
<b>6. Name and Address of Current Registered Agent</b>  SHEWALTER, WILLIAM A 777 S. FLAGLER DRIVE C/O THE GOODMAN COMPANY WEST PALM BEACH, FL 33401			<b>7. Name and Address of New Registered Agent</b>  Name  Street Address (P.O. Box Number is Not Acceptable)  City <span style="float: right;">FL</span> Zip Code		
<b>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.</b>					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>Filing Fee is \$50.00 Due by May 1, 2004</b>		<b>Make check payable to Florida Department of State</b>			
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS / CHANGES</b>		
<b>TITLE</b> MGR	<b>NAME</b> GOODMAN PROPERTIES, INC.		<b>TITLE</b> <span style="float: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</span>		
<b>STREET ADDRESS</b> 777 S. FLAGLER DRIVE	<b>STREET ADDRESS</b> 777 S. FLAGLER DRIVE		<b>STREET ADDRESS</b> <span style="float: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</span>		
<b>CITY-ST-ZIP</b> WEST PALM BEACH, FL 33401	<b>CITY-ST-ZIP</b> WEST PALM BEACH, FL 33401		<b>CITY-ST-ZIP</b> <span style="float: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</span>		
<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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<b>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.</b>					
Goodman Properties Inc., manager					
<b>SIGNATURE:</b> <i>William A. Shewalter</i>			Date: 4/30/04		Daytime Phone #: 561-833-3777
William A. Shewalter, Vice President					

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