

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 22, 2005 8:00 am**  
**Secretary of State**

03-22-2005 90183 021 \*\*\*\*50.00

**DOCUMENT # L03000047069**

1. Entity Name  
BSG LONGBOAT KEY, LLC



Principal Place of Business  
SOUTHRUST BANK BUILDING  
303 9TH STREET WEST, STE 201  
BRADENTON, FL 34205

Mailing Address  
SOUTHRUST BANK BUILDING  
303 9TH STREET WEST, STE 201  
BRADENTON, FL 34205

**20023680**



03082005No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
52-2420753

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

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

BLALOCK, LANDERS, WALTERS & VOGLER, P.A.  
802 11TH STREET WEST  
BRADENTON, FL 34205

**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 reinstating)

DATE

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

**9. MANAGING MEMBERS/MANAGERS**

TITLE	P
NAME	BUSKIRK, FRANK
STREET ADDRESS	303 NINTH STREET W., SUITE 201
CITY-ST-ZIP	BRADENTON, FL 34205
TITLE	VP
NAME	GRAVELY, JEFFREY D
STREET ADDRESS	303 NINTH STREET W., SUITE 201
CITY-ST-ZIP	BRADENTON, FL 34205
TITLE	T
NAME	SUMMERS, STEVE E
STREET ADDRESS	303 NINTH STREET W., SUITE 201
CITY-ST-ZIP	BRADENTON, FL 34205
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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:**

*John E. Simon*

3/15/05

941-750-9494

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

Date

Daytime Phone #