2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 09, 2007
Secretary of State

DOCUMENT# L04000012654

Entity Name: B & B REALTY, LLC

Current Principal Place of Business:

12909 FIRST ISLE
HUDSON, FL 34667

New Principal Place of Business:

7309 ISLANDER LANE
HUDSON, FL 34667

Current Mailing Address:

12 DEARBORN LN
BEDFORD, NH 03110

New Mailing Address:

7309 ISLANDER LANE
HUDSON, FL 34667

FEI Number: 51-0498216 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SHEPPARD, ROBERT
12909 FIRST ISLE
HUDSON, FL 34667 US

Name and Address of New Registered Agent:

BRADY, WILLIAM L
7309 ISLANDER LANE
HUDSON, FL 34667 US

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.

SIGNATURE: WILLIAM L. BRADY 01/09/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: SHEPARD, ROBERT
Address: 12909 FIRST ISLE
City-St-Zip: HUDSON, FL 34667

Title: MGR ( ) Delete
Name: BRADY, WILLIAM
Address: 12 DEARBORN LANE
City-St-Zip: BEDFORD, NH 03110

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: BRADY, WILLIAM L
Address: 7309 ISLANDER LANE
City-St-Zip: HUDSON, FL 34667

Title: MGR (X) Change ( ) Addition
Name: SHEPPARD, ROBERT
Address: 12909 FIRST ISLE
City-St-Zip: HUDSON, FL 34667

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: WILLIAM L. BRADY MGR 01/09/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date