


FILED
Jun 05, 2008 8:00 am
Secretary of State

06-05-2008 90224 014 ***138.75

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000026630			
1. Entity Name B & T PROPERTIES, LLC			
Principal Place of Business 2128 HWY 19 SOUTH PERRY, FL 32348		Mailing Address 2128 HWY 19 SOUTH PERRY, FL 32348	
2. Principal Place of Business - No P.O. Box # 2128 S Byron Butler Pkwy		3. Mailing Address 2128 S Byron Butler Pkwy	
Sulte, Apt. #, etc.		Sulte, Apt. #, etc.	
City & State Perry, FL		City & State Perry, FL	
Zip 32348		Zip 32348	
Country		Country	
4. FEI Number 83-0389354		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 THOMAS LEWIS CAL 2128 HWY 19 SOUTH PERRY, FL 32348		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 2128 S Byron Pkwy City Perry FL 32348	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when re-elected)</small>			
FILE NOW!!! FEE IS \$138.75 Due by September 12, 2008		In accordance with s. 807.193(2)(b), F.S., the limited liability company did not receive the prior notice.	
		Make check payable to: Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM THOMAS, LEWIS CAL 2128 HWY 19 SOUTH PERRY, FL 32348 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM THOMAS, LEWIS CAL 2128 S Byron Butler Pkwy Perry, FL 32348 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BRANTLEY, ALAN R 2128 HWY 19 SOUTH PERRY, FL 32348 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BRANTLEY, ALAN R. 2128 S Byron Butler Pkwy Perry, FL 32348 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 628, Florida Statutes.			
SIGNATURE: <i>Alan R. Brantley</i>		Member 850-584-6221	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		6/05/08	