

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 26, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # L04000032002**

1. Entity Name  
**BGK1 DEVELOPERS, LLC**



Principal Place of Business

**1142 KELTON AVE  
OCOE, FL 34761**

Mailing Address

**1090 DON MILLS ROAD  
SUITE 600  
TORONTO, ON M3C 3-R6**



01222008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**47-0943184**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**SKELLEY, JEANNIE L  
1142 KELTON AVE  
OCOE, FL 34761**

**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 \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75  
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	BGK1 INVESTMENTS, LLP
STREET ADDRESS	1142 KELTON AVE
CITY-ST-ZIP	OCOE, FL 34761

TITLE	
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U000000840188  
03/06/08-80037-017 138.75

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IN THIS SPACE**

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 608, Florida Statutes.

**SIGNATURE:** \_\_\_\_\_

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

02/21/08

Date

Daytime Phone # \_\_\_\_\_