

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000035597

FILED
Apr 22, 2009
Secretary of State

Entity Name: B & F REALTY ENTERPRISES, LLC

Current Principal Place of Business:

3903 ENCHANTED OAKS LANE
SEBRING, FL 33875

New Principal Place of Business:

1061 N.E. 27 WAY
POMPANO BEACH, FL 33062

Current Mailing Address:

3903 ENCHANTED OAKS LANE
SEBRING, FL 33875

New Mailing Address:

1061 N.E. 27 WAY
POMPANO BEACH, FL 33062

FEI Number: 20-1617286

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAINS, BRUCE E RA
3903 ENCHANTED OAKS LANE
SEBRING, FL 33875 US

Name and Address of New Registered Agent:

GELFAND, FRED B RA
1061 N.E. 27 WAY
POMPANO BEACH, FL 33062 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: FRED B. GELFAND

04/22/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GELFAND, FREDRICK B MGRM
Address: 1061 NE 27TH WAY
City-St-Zip: POMPANO BEACH, FL 33062

Title: MGRM (X) Delete
Name: MAINS, BRUCE E MGRM
Address: 3903 ENCHANTED OAKS LANE
City-St-Zip: SEBRING, FL 33875

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GELFAND, NINA E MGRM
Address: 1061 NE 27TH WAY
City-St-Zip: POMPANO BEACH, FL 33062

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: FRED B. GELFAND

RA

04/22/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date