


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 17, 2008 08:00 AM
Secretary of State

DOCUMENT # L04000046227 1. Entity Name BSG ARMENIA, LLC	
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Principal Place of Business 303 NINTH STREET WEST SUITE 201 BRADENTON, FL 34205	Mailing Address 303 NINTH STREET WEST SUITE 201 BRADENTON, FL 34205
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DO NOT WRITE IN THIS SPACE



01232008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-1289554	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent BLALOCK, WALTERS, HELD & JOHNSON, P.A. 802 11TH STREET WEST BRADENTON, FL 34205
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**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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)


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

04/30/08-80003-004 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BUSKIRK, FRANK A 303 NINTH STREET WEST SUITE 201 BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SUMMERS, STEVE E 303 NINTH STREET WEST SUITE 201 BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GRAVELY, JEFFREY D 303 NINTH STREET WEST SUITE 201 BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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:  **4-10-08 941-750-9494**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #