

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000052485

FILED
Mar 30, 2006
Secretary of State

Entity Name: BPS&H LLC

Current Principal Place of Business:

PMB 225 2109 US HWY 90 WEST
SUITE 170
LAKE CITY, FL 32055

New Principal Place of Business:

Current Mailing Address:

PMB 225 2109 US HWY 90 WEST
SUITE 170
LAKE CITY, FL 32055

New Mailing Address:

FEI Number: 80-0114649

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDRIX, SABRINA K
436 SW BISHOP AVENUE
LAKE CITY, FL 32024 US

Name and Address of New Registered Agent:

HENDRIX, SABRINA K
152 SE DEFENDER DRIVE
LAKE CITY, FL 32025 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: SABRINA K HENDRIX

03/30/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SH ENTERPRISES,
Address: PMB 225 2109 US HWY 90 W , SUITE 170
City-St-Zip: LAKE CITY, FL 32055 US

Title: MGRM (X) Delete
Name: POPE, JAMES G
Address: RT 22 BOX 29471
City-St-Zip: LAKE CITY, FL 32024 US

Title: MGRM () Delete
Name: POPE, JEWELL M
Address: RT 22 BOX 29471
City-St-Zip: LAKE CITY, FL 32024

Title: MGRM () Delete
Name: BOWEN, KENNETH M
Address: 519 DUCKETT COURT
City-St-Zip: LAKE CITY, FL 32024

Title: MGRM () Delete
Name: BOWEN, VICKI I
Address: 519 DUCKETT COURT
City-St-Zip: LAKE CITY, FL 32024

Title: MGRM () Delete
Name: SMITH, JENNIFER J
Address: PMB 225 2109 US HWY 90 WEST
City-St-Zip: LAKE CITY, FL 32055

ADDITIONS/CHANGES:

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

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

Title: MGRM (X) Change () Addition
Name: SH ENTERPRISES LLC,
Address: 519 SW DUCKETT COURT
City-St-Zip: LAKE CITY, FL 32024

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

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

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

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: KENNETH BOWEN

MGRM

03/30/2006

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