

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000054974

Entity Name: BAS VALRICO, LLC

FILED
Apr 30, 2006
Secretary of State

Current Principal Place of Business:

2939 SKYVIEW DRIVE
LAKELAND, FL 33801

New Principal Place of Business:

Current Mailing Address:

2939 SKYVIEW DRIVE
LAKELAND, FL 33801

New Mailing Address:

1612 HERITAGE DR.
VALRICO, FL 33594

FEI Number: 32-0128275

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABRAHAM, S. THOMAS ESQ.
1305 N. ARMENIA AVE.
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

BABY, MAKIL A P
2939 SKYVIEW DR.
LAKELAND, FL 33801 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: BABY A MAKIL

04/30/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MAKIL, BABY A
Address: 1612 HERITAGE RD.
City-St-Zip: VALRICO, FL 33594

Title: MGRM () Delete
Name: MAKIL, BENCY B
Address: 1612 HERITAGE RD.
City-St-Zip: VALRICO, FL 33594

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: MAKIL, BABY A
Address: 1612 HERITAGE RD.
City-St-Zip: VALRICO, FL 33594

Title: MGRM (X) Change () Addition
Name: MAKIL, BABY A P
Address: 1612 HERITAGE RD.
City-St-Zip: VALRICO, FL 33594

Title: P () Change (X) Addition
Name: MAKIL, BABY A P
Address: 1612 HERITAGE DR.
City-St-Zip: VALRICO, FL 33594

Title: P () Change (X) Addition
Name: MAKIL, BABY A P
Address: 1612 HERITAGE DR.
City-St-Zip: VALRICO, FL 33594

Title: P () Change (X) Addition
Name: MAKIL, BABY A P
Address: 1612 HERITAGE DR.
City-St-Zip: VALRICO, FL 33594

Title: P () Change (X) Addition
Name: MAKIL, BABY A P
Address: 1612 HERITAGE DR.
City-St-Zip: VALRICO, FL 33594

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: BABY A MAKIL

P

04/30/2006

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