

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000063398

FILED  
Jan 20, 2010  
Secretary of State

Entity Name: BCD INVESTMENT GROUP, LLC

## Current Principal Place of Business:

2085 ANDREA LANE  
FORT MYERS, FL 33912

## New Principal Place of Business:

2085 ANDREA LANE  
# 6  
FORT MYERS, FL 33912

## Current Mailing Address:

2085 ANDREA LANE  
FORT MYERS, FL 33912

## New Mailing Address:

2085 ANDREA LANE  
# 6  
FORT MYERS, FL 33912

FEI Number: 20-1526083

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DUBY, CAROL M  
2085 ANDREA LANE  
FORT MYERS, FL 33912 US

## Name and Address of New Registered Agent:

DUBY, CAROL M  
2085 ANDREA LANE  
# 6  
FORT MYERS, FL 33912 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:

01/20/2010

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR  
Name: DUBY, CAROL M  
Address: 2085 ANDREA LANE  
City-St-Zip: FORT MYERS, FL 33912

Title: MGRM  
Name: MOORE, CONNIE  
Address: 2085 ANDREA LANE  
City-St-Zip: FORT MYERS, FL 33912

Title: MGRM  
Name: NORTH, DAVID  
Address: 2085 ANDREA LANE  
City-St-Zip: FORT MYERS, FL 33912

Title: MGRM  
Name: BUTZIN, BRENT  
Address: 2085 ANDREA LANE  
City-St-Zip: FORT MYERS, FL 33912

Title: MGRM  
Name: NORTH, DARREL  
Address: 2085 ANDREA LANE  
City-St-Zip: FORT MYERS, FL 33912

Title: MGRM  
Name: NORTH, DARRIN  
Address: 2085 ANDREA LANE  
City-St-Zip: FORT MYERS, FL 33912

I hereby 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: BRENT BUTZIN

MGRM

01/20/2010

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