## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000079646

Entity Name: BBMPS ENTERPRISES, LLC

FILED Jan 19, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

227 SPRINGMEADOW WAY MONROE TOWNSHIP, NJ 08831

Current Mailing Address: New Mailing Address:

227 SPRINGMEADOW WAY
MONROE TOWNSHIP, NJ 08831
825 PLACID LAKE DRIVE
OSPREY, FL 34229

FEI Number: 20-1830993 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SHAW, TIMOTHY S 50 CENTRAL AVE SUITE 700 SARASOTA, FL 34236 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:

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

Electronic Signature of Registered Ager

MANAGING MEMBERS/MANAGERS:

 Title:
 MGR
 ( ) Delete

 Name:
 BLACKMAN, EDWARD L MD

 Address:
 227 SPRINGMEADOW WAY

 City-St-Zip:
 MONROE TOWNSHIP, NH 08831

Title: MGR ( ) Delete
Name: SPIEGEL, PHILLIP

Address: 350 SUNRISE WAY
City-St-Zip: MONROE TOWNSHIP, NJ 08831

Title: MGR (X) Change () Addition
Name: BLACKMAN, EDWARD L MD
Address: 825 PLACID LAKE DRIVE
City-St-Zip: OSPREY, FL 34229

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: EDWARD L. BLACKMAN MGR 01/19/2009