

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000085737

Entity Name: B&M FINANCIAL, LLC

FILED
Apr 18, 2007
Secretary of State

Current Principal Place of Business:

25247 BOLIVAR DRIVE
PUNTA GORDA, FL 33983

New Principal Place of Business:

25237 BOLIVAR DRIVE
PUNTA GORDA, FL 33983

Current Mailing Address:

25247 BOLIVAR DRIVE
PUNTA GORDA, FL 33983

New Mailing Address:

25237 BOLIVAR DRIVE
PUNTA GORDA, FL 33983

FEI Number: 38-3713326

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCKINLEY, MICHAEL R
21175 OLEAN BLVD.
PORT CHARLOTTE, FL 33952 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MCISAAC, BRIAN K
Address: 25247 BOLIVAR DRIVE
City-St-Zip: PUNTA GORDA, FL 33983

Title: MGRM () Delete
Name: MCISAAC, MARY A
Address: 25247 BOLIVAR DRIVE
City-St-Zip: PUNTA GORDA, FL 33983

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MCISAAC, BRIAN K
Address: 25237 BOLIVAR DRIVE
City-St-Zip: PUNTA GORDA, FL 33983

Title: MGRM (X) Change () Addition
Name: MCISAAC, MARY A
Address: 25237 BOLIVAR DRIVE
City-St-Zip: PUNTA GORDA, FL 33983

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: MARY A MC ISAAC

MGRM

04/18/2007

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