2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 03, 2006 08:00 AM
Secretary of State

ANNUAL REPORT						Secretary of State	
DOCU 1. Entity Nam BHA, LLC		04000092	715			Secretary or	State
Principal Place of Business Mailing Address 2033 MAIN ST, STE, 600 2033 MAIN ST, STE, 600 SARASOTA, FL 34237 SARASOTA, FL 34237							
DO NOT WRITE IN THIS SPAC				CF	01242006 No Chg-LLC CR2E083 (11/05)		
	0 1101	*****			~	4. FEI Number 20-2144915 5. Certificate of Status Desired	Applied For Not Applicable Additional quired
6. Name and Address of Gurrent Registered Agent MYERS, TROY H JR. 2033 MAIN ST. STE. 600 SARASOTA, FL 34237				DO NOT WRITE IN THIS SPACE			
the obligat	tions of registered at	gent, name of registered agent ar			} ed office ar register a Agent signature required	ed agent, or both, in the State of Florida. I am familiar when rehateing).	with, and accept
9.		IANAGING MEMBER	S/MANAGERS		1		
TITLE NAME SIBSETS ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MYERS, TROY 2033 MAIN ST, SARASOTA, FL	STE.600				1100000454843 64715706-80032-011	1 SO.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP						DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS							

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited (lability company or the receiver or trustee empowered to execute this report as required by Chapter 508, Florida Statutes.

SIGNATURE JESTICA !

CHY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CHY-ST-ZIP

Troy H. Myers, Jr. as Manager

03/01/2006

(941)953-8110

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE
