


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 02, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000001427

1. Entity Name
B & B VENTURES OF LITHIA, L.L.C.



Principal Place of Business Mailing Address

**708 LITHIA PINECREST ROAD
 SUITE 103
 BRANDON, FL 33511 US**

**P.O. BOX 649
 BRANDON, FL 33609-0649 US**

DO NOT WRITE IN THIS SPACE



03262007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-2113614	Applied For Not Applicable
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5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**SEFCIK, BRIAN
 708 LITHIA PINECREST ROAD
 SUITE 103
 BRANDON, FL 33511**

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reselecting)

**Filing Fee is \$50.00
 Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SEFCIK, BRIAN S 708 LITHIA PINECREST ROAD SUITE 103 BRANDON, FL 33511
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BARTLETT, JACK L JR. 1102 OAK BRUSH PLACE VALRICO, FL 33594
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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 04/06/07-80016-007 50.00

11. I hereby certify that the information supplied with this filing 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 liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *[Signature]* 3/20/07 (813) 689-7161

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #