

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000013368

Entity Name: BPO3, LLC

FILED
Mar 06, 2007
Secretary of State

Current Principal Place of Business:

% RANDOLPH J. WOLFE, ESQ.
100 N. TAMPA ST. SUITE 2700
TAMPA, FL 33602

New Principal Place of Business:

14602 MCCORMICK DRIVE
TAMPA, FL 33626

Current Mailing Address:

% RANDOLPH J. WOLFE, ESQ.
P.O. BOX 3391
TAMPA, FL 33601

New Mailing Address:

% ANTHONY P. SOLAZZO
3166 EDMOND DRIVE
PALM HARBOR, FL 34685

FEI Number: 20-2312336

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

F & L CORP.
ONE INDEPENDENT DRIVE, SUITE 1300
JACKSONVILLE, FL 32202 US

Name and Address of New Registered Agent:

SOLAZZO, ANTHONY P CEO
3166 EDMOND DRIVE
PALM HARBOR, FL 34685 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: ANTHONY P. SOLAZZO

03/06/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: D () Delete
Name: SOLOZZO, ANTHONY
Address: 14602 M. CORMICK DR.
City-St-Zip: TAMPA, FL 33626

Title: CEO (X) Delete
Name: YOKO, JOHN
Address: 14602 MCCORMICK DR.
City-St-Zip: TAMPA, FL 33626

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SOLAZZO, ANTHONY P
Address: 14602 MCCORMICK DR
City-St-Zip: TAMPA, FL 33626

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ANTHONY P. SOLAZZO

MGRM

03/06/2007

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