

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000028315

**FILED**  
**Jan 31, 2012**  
**Secretary of State**

**Entity Name:** B&L HOME SERVICE PROPERTY MANAGEMENT, LLC

**Current Principal Place of Business:**

15489 ADMIRALTY CIRCLE  
#7  
NORTH FORT MYERS, FL 33917

**New Principal Place of Business:**

**Current Mailing Address:**

15489 ADMIRALTY CIRCLE  
#7  
NORTH FORT MYERS, FL 33917

**New Mailing Address:**

**FEI Number:** 04-3813223

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BONE, WILLIAM H  
15489 ADMIRALTY CIRCLE #7  
NORTH FORT MYERS, FL 33917 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: MGR  
Name: BONE, WILLIAM H  
Address: 15489 ADMIRALTY CIRCLE #7  
City-St-Zip: NORTH FORT MYERS, FL 33917

I hereby 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: WILLIAM H. BONE

MGR

01/31/2012

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