

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000031244

Entity Name: BBW, LLC

FILED  
Jan 17, 2006  
Secretary of State

**Current Principal Place of Business:**

4302 WOODMANS CHART  
SARASOTA, FL 34235 US

**New Principal Place of Business:**

**Current Mailing Address:**

25230 E. ROYCOURT  
HUNTINGTON WOODS, MI 48070 US

**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BLASE, JOHN J  
4302 WOODMANS CHART  
SARASOTA, FL 34235 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: BERESNOFF, GREGORY  
Address: 725 RIVER BEND DRIVE  
City-St-Zip: ROCHESTER HILLS, MI 48307 US

Title: MGRM ( ) Delete  
Name: BERESNOFF, DENISE  
Address: 725 RIVER BEND DRIVE  
City-St-Zip: ROCHESTER HILLS, MI 48307 US

Title: MGRM ( ) Delete  
Name: BLASE, ROSEMARY E  
Address: 25230 E. ROYCOURT  
City-St-Zip: HUNTINGTON WOODS, MI 48070 US

Title: MGRM ( ) Delete  
Name: WALDMAN, BARRY  
Address: 12927 BORGMAN  
City-St-Zip: HUNTINGTON WOODS, MI 48070 US

Title: MGRM ( ) Delete  
Name: WALDMAN, ANN  
Address: 12927 BORGMAN  
City-St-Zip: HUNTINGTON WOODS, MI 48070 US

**ADDITIONS/CHANGES:**

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

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

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

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

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: JOHN J BLASE

DR

01/17/2006

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