

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000048068

Entity Name: BFRANK, LLC

FILED
Jan 31, 2006
Secretary of State

Current Principal Place of Business:

2229 BREVARD AVE
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

PO BOX 2104
FORT MYERS, FL 33902

New Mailing Address:

FEI Number: 20-2913160

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMONDS, JR., HARLAND F MR.
2229 BREVARD AVE
FORT MYERS, FL 33901 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 () Delete
Name: SIMONDS, JR., HARLAND F MR.
Address: 2229 BREVARD AVE.
City-St-Zip: FORT MYERS, FL 33901

Title: MGR () Delete
Name: SIMONDS, BEVERLY A MRS
Address: 2229 BREVARD AVE
City-St-Zip: FORT MYERS, FL 33901

Title: MGR (X) Delete
Name: SIMONDS, III, HARLAND F MR.
Address: 2229 BREVARD AVE.
City-St-Zip: FORT MYERS, FL 33901

Title: MGR (X) Delete
Name: SIMONDS, CHRISTOPHER A MR.
Address: 2229 BREVARD AVE.
City-St-Zip: FORT MYERS, FL 33901

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SIMONDS, JR., HARLAND F MR.
Address: 2229 BREVARD AVE.
City-St-Zip: FORT MYERS, FL 33901

Title: MGRM (X) Change () Addition
Name: SIMONDS, BEVERLY A MRS
Address: 2229 BREVARD AVE.
City-St-Zip: FORT MYERS, FL 33901

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: HARLAND F. SIMONDS, JR

MGRM

01/31/2006

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