## \*2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**DOCUMENT # L05000056947** 

1. Entity Name BSC ERIE, LLC.



FILED Apr 10, 2007 08:00 AM Secretary of State

Principal Place of Business

**303 9TH STREET WEST** 

SUITE 201

BRADENTON, FL 34205 L

Mailing Address

303 9TH STREET WEST

SUITE 201

BRADENTON, FL 34205 US



04032007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-2967154 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

SUMMER, STEVE E 303 9TH STREET WEST SUITE 201 BRADENTON, FL 34205

## 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.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BUSKIRK, FRANK A 303 9TH STREET WEST, SUITE 201 BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SUMMERS, STEVE E 303 9TH STREET WEST, SUITE 201 BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BUSKIRK, ADAM B 303 9TH STREET WEST, SUITE 201 BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS	

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## DO NOT WRITE IN THIS SPACE

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 escurate 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 of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: 4

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #