

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000059186

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: BEAR POINTE INVESTMENT, L.L.C.

## Current Principal Place of Business:

12800 UNIVERSITY DRIVE  
SUITE 275  
FT. MYERS, FL 33907 US

## New Principal Place of Business:

## Current Mailing Address:

12800 UNIVERSITY DRIVE  
SUITE 275  
FT. MYERS, FL 33907 US

## New Mailing Address:

FEI Number: 20-3099153

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PREISS, MICHELLE A  
12800 UNIVERSITY DRIVE  
SUITE 275  
FT. MYERS, FL 33907 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: BUIGAS, OJ  
Address: 12800 UNIVERSITY DRIVE SUITE 275  
City-St-Zip: FT MYERS, FL 33907 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: COO (X) Change ( ) Addition  
Name: BAUM, HOWARD  
Address: 12800 UNIVERSITY DRIVE SUITE 275  
City-St-Zip: FT MYERS, FL 33907 US

Title: CFO ( ) Change (X) Addition  
Name: DOUGLAS, CAROL A  
Address: 12800 UNIVERSITY DR SUITE 275  
City-St-Zip: FORT MYERS, FL 33907 US

Title: VP ( ) Change (X) Addition  
Name: PREISS, MICHELLE A  
Address: 12800 UNIVERSITY DR SUITE 275  
City-St-Zip: FORT MYERS, FL 33907 US

I hereby certify that the information supplied with this filing does not qualify 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: MICHELLE A PREISS

VP

03/23/2009

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