

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000059188

Entity Name: B.G. & R.A., LLC

FILED
Apr 18, 2006
Secretary of State

Current Principal Place of Business:

328 CALUSA STREET, UNIT 228
KEY LARGO, FL 33037

New Principal Place of Business:

325 CALUSA STREET, UNIT 228
KEY LARGO, FL 33037

Current Mailing Address:

328 CALUSA STREET, UNIT 228
KEY LARGO, FL 33037

New Mailing Address:

325 CALUSA STREET, UNIT 228
KEY LARGO, FL 33037

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANGULO, ANA MARIA ESQ.
5975 SUNSET DRIVE
SUITE 503
SOUTH MIAMI, FL 33143 US

Name and Address of New Registered Agent:

MC GUIRE, DIANE ESQ.
P.O. BOX 1062
KEY LARGO, FL 33037 US

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: DIANE MC GUIRE

04/18/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FIVELLA, WILLIAM
Address: 328 CALUSA STREET, UNIT 228
City-St-Zip: KEY LARGO, FL 33037

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FIVELLA, WILLIAM
Address: 325 CALUSA STREET, UNIT 228
City-St-Zip: KEY LARGO, FL 33037

Title: ASST () Change (X) Addition
Name: FIVELLA, VIRGINIA
Address: 325 CALUSA STREET, UNIT 228
City-St-Zip: KEY LARGO, FL 33037

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: WILLIAM FIVELLA

MGRN

04/18/2006

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