

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

**FILED**  
**Mar 27, 2006 8:00 am**  
**Secretary of State**

02-27-2006 90420 023 \*\*\*\*50.00

**DOCUMENT # L05000068341**

1. Entity Name

BSJ PRODUCTION, LLC



Principal Place of Business

2 OFFICE PARK DRIVE, SUITE A7  
PALM COAST FL 32137

Mailing Address

2 OFFICE PARK DRIVE, SUITE A7  
PALM COAST FL 32137



1st MOORE

CR2E083 (10/05)

2. Principal Place of Business

395 SW Palm Coast Pkwy  
Suite, Apt. #, etc.  
#5

3. Mailing Address

395 SW Palm Coast Pkwy  
Suite, Apt. #, etc.  
#5

City & State

Palm Coast, FL

City & State

Palm Coast, FL

4. FEI Number

20-3132073

Applied For

Not Applicable

Zip

32137

Country

FLAGLER

Zip

32137

Country

FLAGLER

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

KATZ, B. PAUL  
1 FLORIDA PARK DRIVE SOUTH, ATRIUM SUITE  
PALM COAST FL 32137

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**Due By May 1, 2006**

9. MANAGING MEMBERS / MANAGERS

TITLE MGR ☐ Delete  
NAME PASKIEWICZ, JOHN K  
STREET ADDRESS 2 OFFICE PARK DRIVE, SUITE A7  
CITY- ST- ZIP PALM COAST FL 32137

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
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STREET ADDRESS  
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TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

10. ADDITIONS / CHANGES

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

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TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate 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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

*John Karl Paskiewicz*

John Karl Paskiewicz 2/13/06 (384)569-6182

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

Date

Daytime Phone #



ATTACHMENT

36003472

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 2, 2006

BSJ PRODUCTION, LLC  
2 OFFICE PARK DRIVE, SUITE A7  
PALM COAST, FL 32137

Subject: **BSJ PRODUCTION, LLC**

Reference Number: **L05000068341**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you **MUST** now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/CD  
ANNUAL REPORTS SECTION