

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000070449

FILED
Sep 12, 2007
Secretary of State

Entity Name: BDR BUSINESS BROKERS, LLC

Current Principal Place of Business:

2519 SQUAW CREEK
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

2519 SQUAW CREEK
CLERMONT, FL 34711

New Mailing Address:

FEI Number: 20-3171850

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARKER, ROGER
2519 SQUAW CREEK
CLERMONT, FL 34711 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: MGRM () Delete
Name: PARKER, CEBURN
Address: 8317 9TH AVE. TERRACE, NW
City-St-Zip: BRADENTON, FL 34209

Title: MGRM () Delete
Name: PARKER, ROGER
Address: 2519 SQUAW CREEK
City-St-Zip: CLERMONT, FL 34711

Title: MGRM (X) Delete
Name: DEARMOND, BRENDA
Address: 2519 SQUAW CREEK
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PARKER, ROGER
Address: 2519 SQUAW CREEK
City-St-Zip: CLERMONT, FL 34711

Title: MGRM (X) Change () Addition
Name: DEARMOND, BRENDA
Address: 2519 SQUAW CREEK
City-St-Zip: CLERMONT, FL 34711

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROGER PARKER

MGRM

09/12/2007

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