2007 LIMITED LIABILITY COMPANY

FILED ANNUAL REPORT Apr 04, 2007 08:00 All Secretary of State DOCUMENT # L05000078185 1. Entity Name BNV. LLC Principal Place of Business Mailing Address 4410 NW CR 326 2138 SW 9TH RD OCALA, FL 34482 US OCALA, FL 34474 US 01292007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-3273099 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SKAR, SUKHWINDER S DO NOT WRITE 2138 SW 9TH RD. OCALA, FL 34474 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 MANAGING MEMBERS/MANAGERS 9. TITLE MGR SKAR, SUKHWINDER S NAME 2138 SW 9TH RD. STREET ADDRESS CITY-ST-ZIP OCALA, FL 34474 U00000689729 04/11/07-80046-017 50.00 TITLE NAME SKAR, ULLA R STREET ADDRESS 2138 SW 9TH RD. CITY-ST-ZIP OCALA, FL 34474 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITI F NAME

Thereby certify that the information supplied with this filing does not quality for the exemptions contained in Chapter 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.

ULLA RAVN SKAR

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

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS