


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 11, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # L05000086049</b>	
1. Entity Name BFI PROPERTIES, LLC	

Principal Place of Business 1909 CELTIC ROAD TALLAHASSEE, FL 32317 US	Mailing Address 1909 CELTIC ROAD TALLAHASSEE, FL 32317 US
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**DO NOT WRITE IN THIS SPACE**



01102007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 59-0761871	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent

BROCKMEIER, TAMMY L  
 1909 CELTIC ROAD  
 TALLAHASSEE, FL 32317

**DO NOT WRITE 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00**  
**Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BROCKMEIER, TAMMY L 1909 CELTIC ROAD TALLAHASSEE, FL 32317
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**DO NOT WRITE IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify 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.

**SIGNATURE:** *Tammy L. Brockmeier* (Tammy L. Brockmeier) 3/28/2007 850-422-3869

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #