

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000086049

1. Entry 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



03182008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 59-0761871	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

BROCKMEIER, TAMMY L
1909 CELTIC ROAD
TALLAHASSEE, FL 32317

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U00000944080
 05/29/08-80086-005 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BROCKMEIER, TAMMY L 1909 CELTIC ROAD TALLAHASSEE, FL 32317
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 Brockmeier* **Tammy Brockmeier** 4/28/2008 ⁽⁸⁵⁰⁾ 422-3869

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