

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000089066

FILED  
Apr 05, 2006  
Secretary of State

Entity Name: BBS OF SOUTHWEST FLORIDA, LLC

**Current Principal Place of Business:**

200 ROBINWOOD CIRCLE  
SANIBEL, FL 33957 US

**New Principal Place of Business:**

**Current Mailing Address:**

200 ROBINWOOD CIRCLE  
SANIBEL, FL 33957 US

**New Mailing Address:**

FEI Number: 56-2533324

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

SWETT, H A  
1625 HENDRY STREET  
SUITE 301  
FORT MYERS, FL 33901 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MBR ( ) Change (X) Addition  
Name: SMITH, GREG  
Address: 3714 FOWLER STREET  
City-St-Zip: FT. MYERS, FL 33901

Title: MBR ( ) Change (X) Addition  
Name: BAKER, MARK  
Address: 3714 FOWLER STREET  
City-St-Zip: FT. MYERS, FL 33901

Title: MBR ( ) Change (X) Addition  
Name: BAKER, SCOTT  
Address: 3714 FOWLER STREET  
City-St-Zip: FT. MYERS, FL 33901

I hereby certify that the information supplied with this filing does not qualify for the 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: GREG SMITH

MBR

04/05/2006

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