

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000089861

Entity Name: BLGM, LLC

FILED  
Mar 27, 2008  
Secretary of State

## Current Principal Place of Business:

12555 ORANGE DRIVE, #105  
DAVIE, FL 33330

## New Principal Place of Business:

12349 SW 53 STREET  
SUITE 204  
COOPER CITY, FL 33330

## Current Mailing Address:

12555 ORANGE DRIVE, #105  
DAVIE, FL 33330

## New Mailing Address:

12349 SW 53 STREET  
SUITE 204  
COOPER CITY, FL 33330

FEI Number: 20-3458970

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KELLEY, PATRICK G  
1401 E BROWARD BLVD., #206  
FT LAUDERDALE, FL 33301 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: D ( ) Delete  
Name: CAILIS, EMANUEL G  
Address: 6321 OLDE MOAT WAY  
City-St-Zip: DAVIE, FL 33331

Title: D ( ) Delete  
Name: CAILIS, LINDA  
Address: 6321 OLDE MOAT WAY  
City-St-Zip: DAVIE, FL 33331

Title: D ( ) Delete  
Name: CAILIS, GEORGE E  
Address: 6721 HANCOCK ROAD  
City-St-Zip: SUNSHINE RANCHES, FL 33330

Title: D ( ) Delete  
Name: CAILIS, BARBARA  
Address: 6721 HANCOCK ROAD  
City-St-Zip: SUNSHINE RANCHES, FL 33330

## ADDITIONS/CHANGES:

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

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

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

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: EMANUEL G. CAILIS

D

03/27/2008

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