

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Mar 09, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000093647



1. Entity Name

BDOT RANCH LLC

Principal Place of Business

**5950 COUNTY ROAD 315C
KEYSTONE HEIGHTS FL 32656
US**

Mailing Address

**5428 STETSON ROAD
JACKSONVILLE FL 32207
US**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

20-3557689

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

1st MOORE

CR2E083 (10/06)



6. Name and Address of Current Registered Agent

**HAMRICK, RICHARD
5428 STETSON ROAD
JACKSONVILLE FL 32207**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Richard Hamrick

Richard Hamrick

3/7/07

Signature of individual or principal of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

**Make Check Payable to Florida Department of State
Due By May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	MGR MORRISON, EDWIN 5950 COUNTY ROAD 315C KEYSTONE HEIGHTS FL 32656	☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	MGR MORRISON, DOTTIE 5950 COUNTY ROAD 315C KEYSTONE HEIGHTS FL 32656	☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	MGR HAMRICK, RICHARD 5428 STETSON ROAD JACKSONVILLE FL 32207	☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	MGR DURACHKO, BIANCA 5428 STETSON ROAD JACKSONVILLE FL 32207	☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
	U00000660854 03/20/07-80018-011 50.00
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Richard Hamrick

Richard Hamrick

3/7/07

904-733-5598

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

Date

Daytime Phone #