

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000093771

FILED  
Jul 14, 2008  
Secretary of State

Entity Name: BCSCF ENTERPRISES, LLC

**Current Principal Place of Business:**

102 NORTHCLIFF DRIVE  
GULF BREEZE, FL 32561

**New Principal Place of Business:**

**Current Mailing Address:**

102 NORTHCLIFF DRIVE  
GULF BREEZE, FL 32561

**New Mailing Address:**

FEI Number: 76-0799486      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

ANDREWS, ROBERT W JR.  
102 NORTHCLIFF DRIVE  
GULF BREEZE, FL 32561      US

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

ANDREWS, ROBERT W  
102 NORTHCLIFF DRIVE  
GULF BREEZE, FL 32561      US

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: ROBERT ANDREWS

07/14/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: ANDREWS, ROBERT W  
Address: 102 NORTHCLIFF DRIVE  
City-St-Zip: GULF BREEZE, FL 32561

**ADDITIONS/CHANGES:**

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: ROBERT ANDREWS

MGR

07/14/2008

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