

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
May 08, 2006 8:00 am
Secretary of State

04-17-2006 90034 049 ****50.00

DOCUMENT # L05000113098

1. Entity Name

B.A.M./NORDIN, LLC



Principal Place of Business

394 FORT PICKENS ROAD
PENSACOLA FL 32561

Mailing Address

394 FORT PICKENS ROAD
PENSACOLA FL 32561

add



2. Principal Place of Business

392 N Bonhill RD

3. Mailing Address

392 N Bonhill RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LA CA

City & State

LA CA

Zip

90049

Country

Zip

90049

Country

4. FEI Number

none

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

1st MOORE

CR2E083 (10/05)

6. Name and Address of Current Registered Agent

MOOREHEAD, STEPHEN R
25 WEST GOVERNMENT STREET
PENSACOLA FL 32502

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-issuing)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR	<input type="checkbox"/> Delete
NAME	HOWELL, PAMELA H	
STREET ADDRESS	329 NORTH BONHILL ROAD	
CITY - ST - ZIP	LOS ANGELES CA 90049	
TITLE	MGR	<input type="checkbox"/> Delete
NAME	MADDUX, DONALD GARY	
STREET ADDRESS	329 NORTH BONHILL ROAD	
CITY - ST - ZIP	LOS ANGELES CA 90049	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

10. ADDITIONS/CHANGES

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

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:

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

PAMELA HOWELL HATZER
4-4-06 310472-1236



ATTACHMENT

30007555

FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 19, 2006

B.A.M./NORDIN, LLC
392 N BONHILL RD
LOS ANGELES, CA 90049

Subject: B.A.M./NORDIN, LLC

Reference Number: L05000113098

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report has not been filed and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/RM
ANNUAL REPORTS SECTION

*We have nor do we
intend to have
employees*
Dan Howell
5-206