2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 23, 2009
Secretary of State

DOCUMENT# L05000116276

Entity Name: BSV OAKRIDGE, LLC

Current Principal Place of Business:

2380 OAKRIDGE RD
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

45 SETON TRAIL
ORMOND BEACH, FL 32176

New Mailing Address:

FEI Number: 20-3954509 **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:

BHOOLA, MOHAN
45 SETON TRAIL
ORMOND BEACH, FL 32176 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: MGRM ( ) Delete
Name: SHAH, INDRAVADAN
Address: 770 JOHN ANDERSON DR
City-St-Zip: ORMOND BEACH, FL 32176

Title: MGR ( ) Delete
Name: VAGHAIWALLA, MINOO
Address: 447 NORTH BEACH ST
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGR ( ) Delete
Name: BHOOLA, MOHAN
Address: 45 SETON TRAIL
City-St-Zip: ORMOND BEACH, FL 32176

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:

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: MOHAN BHOOLA MGR 06/23/2009

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