## 2008 LIMITED LIABILITY COMPANY

## **ANNUAL REPORT** DOCUMENT # L06000041463 1. Entity Name **B&G EMP I, LLC** Principal Place of Business Mailing Address **600 NORTH ATLANTIC AVENUE 600 NORTH ATLANTIC AVENUE** DAYTONA BEACH, FL 32118 DAYTONA BEACH, FL 32118 DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

## **FILED** May 12, 2008 8:00 am Secretary of State

05-12-2008 90121 023 \*\*\*138.75

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## HRICKO, KENT J 600 NORTH ATLANTIC AVENUE DAYTONA BEACH, FL 32118

B. The above named entity's submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. I am familiar with, and accept this plants of registered agent, or both, in the State of Florids. I am familiar with, and accept this plants of registered agent, or both, in the State of Florids. I am familiar with, and accept this plants of registered agent, or both, in the State of Florids. I am familiar with, and accept this plants of the state of Florids. I am familiar with, and accept this plants of the state of Florids. I am familiar with, and accept this plants of the state of Florids. I am familiar with, and accept this plants of the state of Florids. I am familiar with, and accept this plants of the state of Florids. I am familiar with, and accept this plants of the state of Florids. I am familiar with, and accept this plants of the state of Florids. I am familiar with, and accept this plants of the state of Florids. I am familiar with, and accept this plants of the state of Florids. I am familiar with, and accept this plants of the state of Florids. I am familiar with, and accept this plants of the state of Florids. I am familiar with, and accept this plants of the state of Florids. I am familiar with, and accept this plants of the state of Florids. I am familiar with, and accept the state of Florids. I am familiar with, and accept the state of Florids. I am familiar with, and accept the state of Florids. I am familiar with, and accept the state of Florids. I accept the state of Flo		for the second s	
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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:

386-267-1603