

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jan 19, 2007 8:00 am**  
**Secretary of State**

01-19-2007 90132 040 \*\*\*\*50.00

|  |  |  |  |   |   |
|--|--|--|--|---|---|
| <b>DOCUMENT # L06000060080</b><br>1. Entity Name<br><b>B &amp; G INVESTMENTS, L.L.C.</b>   |  |  |  |    |   |
| Principal Place of Business<br><b>310 W. MINNESOTA AVE.<br/>DELAND, FL 32720</b>   |  |  | Mailing Address<br><b>310 W. MINNESOTA AVE.<br/>DELAND, FL 32720</b> |   |   |
| 2. Principal Place of Business - No P.O. Box #   |  | 3. Mailing Address   |  |   |   |
| Suite, Apt. #, etc.  |  | Suite, Apt. #, etc.  |  |   |   |
| City & State   |  | City & State   |  | 4. FEI Number<br><b>22-3935441</b>  |   |
| Zip  |  | Country  |  | 5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>   |   |
| 6. Name and Address of Current Registered Agent<br><br><b>GUNBY, D. KIRK IV<br/>310 W. MINNESOTA AVE.<br/>DELAND, FL 32720</b>   |  |  |  | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <span style="float: right;"><b>FL</b></span> 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  <b>D. KIRK GUNBY, IV</b><br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>   |  |  |  | DATE <b>1-16-2007</b>   |   |
| <b>Filing Fee is \$50.00<br/>Due by May 1, 2007</b>  |  | <b>Make check payable to<br/>Florida Department of State</b> |  |   |   |
| 9. MANAGING MEMBERS/MANAGERS   |  |  |  | 10. ADDITIONS/CHANGES   |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | MGR<br>BAUMGARTNER, TROY A<br>110 COUNTRY CLUB RD.<br>DELAND, FL 32724 <input type="checkbox"/> Delete |  |  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | MGR<br>GUNBY, D. KIRK IV<br>310 W. MINNESOTA AVE.<br>DELAND, FL 32720 <input type="checkbox"/> Delete  |  |  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | <input type="checkbox"/> Delete  |  |  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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. |  |  |  |   |   |
| <b>SIGNATURE:</b>  <b>D. KIRK GUNBY, IV</b><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>   |  |  |  | Date <b>1-16-2007</b> (386)736-6880<br><small>Daytime Phone #</small>   |   |

60004185



01052007 Chg-LLC CR2E083 (12/06)

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GUNBY, D. KIRK IV  
310 W. MINNESOTA AVE.  
DELAND, FL 32720

Name

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

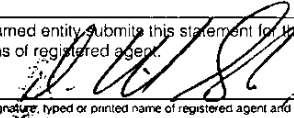
City

FL

Zip Code

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SIGNATURE

 **D. KIRK GUNBY, IV**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

(NOTE: Registered Agent signature required when reinstating)

DATE

**1-16-2007**

**Filing Fee is \$50.00  
Due by May 1, 2007**

**Make check payable to  
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9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

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**SIGNATURE:**

 **D. KIRK GUNBY, IV**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

**1-16-2007 (386)736-6880**