2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000062543

1. Entity Name MSBBB, LLC



FILED Apr 24, 2008 08:00 AN Secretary of State

Principal Place of Business

497 NORTH PINE MEADOW DRIVE DEBARY, FL 32713

Mailing Address

497 NORTH PINE MEADOW DRIVE DEBARY, FL 32713



DO NOT WRITE IN THIS SPACE

03282008 No Chg-LLC

CR2E083 (12/07)

0 45-14-104-1	\$5 .	00	Additional
20-5438816			Not Applicable
FEI Number		1	Applied For

5. Certificate of Status Desired

\$5.00 Additions Fee Required

6. Name and Address of Current Registered Agent

BOLTZ, MATTHEW K 497 NORTH PINE MEADOW DRIVE DEBARY, FL 32713 DO NOT WRITE

8. The al	bove named entity submits this statement for the purpose of char oligations of registered agent.	nging its registered office or registered agent, or both, in the State	of Florida. I am familiar with, and accept
SIGNATU	 JRE		<u> </u>
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	. DATE
	FILE NOW!!! FEE IS \$138.75 May 1, 2008 Fee will be \$538.75		. '
9.	MANAGING MEMBERS/MANAGERS	1. A Second Seco	article of walk purification
TITLE	MGR		
NAME	BOLTZ, MATTHEW K		· 1000 1000 1000 1000 1000 1000 1000 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BOLTZ, MATTHEW K 497 NORTH PINE MEADOW DRIVE DEBARY, FL 32713			
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DO NOT WRITE

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEN

NG MEMBER, OR AUTHORIZED REPRESENTATIVE

4/21/08

407-402-0546

Daytime Phone #