2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000078395

1. Entity Name
BMD INVESTMENT PARTNERS LLC

Principal Place of Business	Mailing Address
50 E. SAMPLE ROAD, SUITE 400 POMPANO BEACH, FL 33064	50 E. SAMPLE ROAD, SUITE 400 POMPANO BEACH, FL 33064

DO NOT WRITE IN THIS SPACE

04042008 No Chg-LLC   CR2E083 (12/07)

4. FEI Number	Applied For
20-5352872	Not Applicable

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

6. Name and Address of Current Registered Agent

SCHEER, DANA M
50 E. SAMPLE ROAD, SUITE 400
POMPANO BEACH, FL 33064

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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 reinstating)   DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

U00000937215
05/27/08-80042-002   138.75

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	FLORESCUE, BARRY W
STREET ADDRESS	50 E. SAMPLE ROAD, SUITE 400
CITY-ST-ZIP	POMPANO BEACH, FL 33064
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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.

SIGNATURE: _____   4/29/08   (954) 784-3131

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #