

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000101320

Entity Name: BAG HOLDINGS, LLC

FILED  
Mar 03, 2009  
Secretary of State

**Current Principal Place of Business:**

2026 OCONNEL AVE  
PALM BAY, FL 32908

**New Principal Place of Business:**

**Current Mailing Address:**

1513 SOUTH LA VENTA ROAD  
WESTLAKE VILLAGE, CA 91361

**New Mailing Address:**

112 FORESTER CT  
SIMI VALLEY, CA 93065

FEI Number: 20-5424649

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ASLAN, JAMES  
2026 OCONNEL AVE  
PALM BAY, FL 32908 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: QUARANTELLLO, BRUCE  
Address: 1513 SOUTH LA VENTA ROAD  
City-St-Zip: WESTLAKE VILLAGE, CA 91361 US

Title: MGRM ( ) Delete  
Name: SATTERFIELD, DUANE  
Address: 1513 SOUTH LA VENTA ROAD  
City-St-Zip: WESTLAKE VILLAGE, CA 91361

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: QUARANTELLLO, BRUCE  
Address: 112 FORESTER CT  
City-St-Zip: SIMI VALLEY, CA 93065 US

Title: MGRM (X) Change ( ) Addition  
Name: SATTERFIELD, DUANE  
Address: 112 FORESTER CT  
City-St-Zip: SIMI VALLEY, CA 93065

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: BRUCE QUARANTELLLO

MGRM

03/03/2009

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