

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000113874

FILED
Nov 19, 2007
Secretary of State**Entity Name:** BFH FLORIDA REALTY, LLC**Current Principal Place of Business:**2629 WAVERLY BARN ROAD
SUITE 138
DAVENPORT, FL 33897 US**New Principal Place of Business:****Current Mailing Address:**2629 WAVERLY BARN ROAD
SUITE 138
DAVENPORT, FL 33897 US**New Mailing Address:****FEI Number:** 20-8003959**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PHELPS, THOMAS M SR.
2629 WAVERLY BARN ROAD
SUITE 138
DAVENPORT, FL 33897 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: PHELPS, THOMAS M SR.
Address: 2629 WAVERLY BARN ROAD #138
City-St-Zip: DAVENPORT, FL 33897**Title:** MGRM () Delete
Name: BOWEN, DAVID J
Address: 2629 WAVERLY BARN ROAD #138
City-St-Zip: DAVENPORT, FL 33897**Title:** MGRM () Delete
Name: PHELPS, THOMAS M JR
Address: 2629 WAVERLY BARN ROAD #138
City-St-Zip: DAVENPORT, FL 33897**Title:** MGRM () Delete
Name: CAPE, ERIC T
Address: 2629 WAVERLY BARN ROAD #138
City-St-Zip: DAVENPORT, FL 33897**Title:** MGR () Delete
Name: MCDANIEL, KATHLEEN T
Address: 2629 WAVERLY BARN ROAD #138
City-St-Zip: DAVENPORT, FL 33897**ADDITIONS/CHANGES:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** MGR (X) Change () Addition
Name: PHELPS, D. LAMAR
Address: 2629 WAVERLY BARN ROAD #138
City-St-Zip: DAVENPORT, FL 33897

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: THOMAS PHELPS

MGRM

11/19/2007

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