

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Sep 11, 2008 8:00 am**  
**Secretary of State**

09-11-2008 90025 014 \*\*\*138.75

**DOCUMENT # L06000114684**

1. Entity Name  
BCC CONSULTING, LLC



Principal Place of Business  
2727 NORTH OCEAN BLVD.  
WESTMINSTER #2  
DELRAY BEACH, FL 33483

Mailing Address  
2727 NORTH OCEAN BLVD.  
WESTMINSTER #2  
DELRAY BEACH, FL 33483

30010337

2. Principal Place of Business - No P.O. Box #  
2727 North Ocean Blvd  
Suite, Apt. #, etc.  
Westminster #3  
City & State  
Delray Beach, FL  
Zip  
33483  
Country  
USA

3. Mailing Address  
2727 North Ocean Blvd  
Suite, Apt. #, etc.  
Westminster #3  
City & State  
Delray Beach, FL  
Zip  
33483  
Country  
USA



07142008 Chg-LLC CR2E083 (12/06)

6. Name and Address of Current Registered Agent  
PETERSON, HENRY B  
2727 NORTH OCEAN BLVD.  
WESTMINSTER #2  
DELRAY BEACH, FL 33483

4. FEI Number  
20-8014137  
Applied For  
Not Applicable

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

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City  
FL 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 Henry Barrett Peterson DATE 9/8/08  
Signature, typed or printed name of registered agent and life if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$138.75 Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PETERSON, HENRY B 2727 NORTH OCEAN BLVD. DELRAY BEACH, FL 33483 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS 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.

SIGNATURE: Henry Barrett Peterson DATE 9/8/08  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE  
HENRY BARRITT PETERSON