

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000002085

Entity Name: BST, LC

FILED  
Mar 27, 2009  
Secretary of State

## Current Principal Place of Business:

2940 SOUTH 25TH STREET  
FORT PIERCE, FL 34981

## New Principal Place of Business:

2980 SOUTH 25TH STREET  
FORT PIERCE, FL 34981

## Current Mailing Address:

2980 SOUTH 25TH STREET  
FORT PIERCE, FL 34981

## New Mailing Address:

FEI Number: 20-8235017

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SOWERBY, DAVID N  
2940 SOUTH 25TH STREET  
FORT PIERCE, FL 34981 US

## Name and Address of New Registered Agent:

TERPENING, JAMES  
2980 SOUTH 25TH STREET  
FORT PIERCE, FL 34981 US

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: JAMES TERPENING

03/27/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: SOWERBY, DAVID N  
Address: 2940 SOUTH 25TH STREET  
City-St-Zip: FORT PIERCE, FL 34981

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: TERPENING, JAMES  
Address: 2980 SOUTH 25TH STREET  
City-St-Zip: FORT PIERCE, FL 34981

Title: MGR ( ) Change (X) Addition  
Name: TERPENING, SHERRY  
Address: 2980 SOUTH 25TH STREET  
City-St-Zip: FORT PIERCE, FL 34981

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: JAMES TERPENING

MGR

03/27/2009

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