

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000089689

Entity Name: BVI/HJSI BOZEMAN, LLC

FILED  
Apr 03, 2008  
Secretary of State

**Current Principal Place of Business:**

5100 SW MACADAM AVENUE, SUITE 360  
PORTLAND, OR 97239

**New Principal Place of Business:**

**Current Mailing Address:**

5100 SW MACADAM AVENUE, SUITE 360  
PORTLAND, OR 97239

**New Mailing Address:**

FEI Number: 36-4615391

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

GURBERS, MICHAEL  
7575 DR. PHILLIPS BOULEVARD, SUITE 225  
ORLANDO, FL 328197221 US

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

GARBERS, MICHAEL MGR  
7575 DR. PHILLIPS BLVD.  
SUITE 225  
ORLANDO, FL 328197221 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: MICHAEL GARBERS

04/03/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

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

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: BOZEMAN VILLAGE INVE, STMENTS, LLC  
Address: 5100 SW MACADAM AVENUE, SUITE 360  
City-St-Zip: PORTLAND, OR 97239

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: JEFFREY L. CHAMBERLAIN

MGRM

04/03/2008

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