2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L08000089733

Entity Name: BWP-GC, LLC

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
19920 NI W. 20TH DI ACE	

18830 N.W. 29TH PLACE MIAMI, FL 33056 US

Current Mailing Address: New Mailing Address:

18830 N.W. 29TH PLACE MIAMI, FL 33056 US

FEI Number: 26-3407151 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

DEVEAUX, CEDRIC MGRM

18830 N.W. 29TH PLACE
MIAMI, FL 33056 US

ALFORD, TONY MGRM

18830 N.W. 29TH PLACE
MIAMI, FL 33056 US

MIAMI, FL 33056 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: TONY ALFORD 04/30/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition Name: RIGGINS, LEMUEL Name:

 Address:
 18830 N.W. 29TH PLACE
 Address:

 City-St-Zip:
 MIAMI, FL 33056 US
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 SIMMONS, ROBERT L II
 Name:

 Address:
 18830 N.W. 29TH PLACE
 Address:

 City-St-Zip:
 MIAMI, FL 33056 US
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 DEVEAUX, CEDRIC
 Name:

 Address:
 18830 N.W. 29TH PLACE
 Address:

 City-St-Zip:
 MIAMI, FL 33056 US
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 DENNIS, DARRELL
 Name:

 Address:
 18830 N.W. 29TH PLACE
 Address:

 City-St-Zip:
 MIAMI, FL 33056 US
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 ALFORD, TONY
 Name:

 Address:
 18830 N.W. 29TH PLACE
 Address:

 City-St-Zip:
 MIAMI, FL 33056 US
 City-St-Zip:

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: ROBERT L SIMMONS, II MGRM 04/30/2009