

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000108045

FILED  
Jan 13, 2010  
Secretary of State

Entity Name: BTM HOLDINGS LLC

**Current Principal Place of Business:**

91 BRANSCOMB ROAD  
15  
GREEN COVE SPRINGS, FL 32043 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1747  
ORANGE PARK, FL 32067 US

**New Mailing Address:**

FEI Number: 27-1274067

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THE NICHOLS GROUP PA  
1329 KINGSLEY AVE  
D  
ORANGE PARK, FL 32073 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  
Name: GORIA, ANTHONY  
Address: 91 BRANSCOMB ROAD #15  
City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

Title: MGR  
Name: WHITE, BRENT  
Address: 91 BRANSCOMB ROAD #15  
City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

Title: MGR  
Name: NICHOLS, JOHN W  
Address: 1329 KINGSLEY AVE #D  
City-St-Zip: ORANGE PARK, FL 32073 US

Title: MGR  
Name: FRANK M SPENCER MARITAL TRUST  
Address: 1329 KINGSLEY AVE #D  
City-St-Zip: ORANGE PARK, FL 32073 US

Title: MGR  
Name: SILVERMAN, STEPHEN J  
Address: 6800 BROADWAY AVENUE  
City-St-Zip: JACKSONVILLE, FL 32254 US

Title: MGR  
Name: AMAJ, LLC  
Address: 91 BRANSCOMB ROAD #15  
City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

I hereby 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: ANTHONY GORIA

MGR

01/13/2010

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