

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000064122

Entity Name: BHTZ, LLC

**FILED**  
**Mar 27, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

7818 MONTEREY BAY DRIVE  
JACKSONVILLE, FL 32256

## **New Principal Place of Business:**

9471 BAYMEADOWS ROAD  
SUITE 207  
JACKSONVILLE, FL 32256

## **Current Mailing Address:**

7818 MONTEREY BAY DRIVE  
JACKSONVILLE, FL 32256

## **New Mailing Address:**

9471 BAYMEADOWS ROAD  
SUITE 207  
JACKSONVILLE, FL 32256

FEI Number: 27-3503128

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STONEBURNER, GRESHAM R  
841 PRUDENTIAL DRIVE, STE. 1400  
JACKSONVILLE, FL 32207 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: MGR  
Name: BAPTISTA, MICHAEL  
Address: 9471 BAYMEADOWS ROAD, SUITE 207  
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGR  
Name: MAJURI, CLAUDIA  
Address: 9471 BAYMEADOWS ROAD, SUITE 207  
City-St-Zip: JACKSONVILLE, FL 32256

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: CLAUDIA MAJURI

MGR

03/27/2012

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