2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

Jan 29, 2004 08:00 AM DOCUMENT # L98000002335 **Secretary of State** 1. Entity Name B-K RANCH, L.C. Principal Place of Business Mailing Address 225 E. ROBINSON STREET SUITE 600 ORLANDO FL 32801 225 E. ROBINSON STREET SUITE 600 ORLANDO FL 32801 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc. Suite, Apt. #, etc. MOORE CR2E083 (11/03) City & State City & State Applied For 4. FEI Number 59-3537601 Not Applicable Zip Zio Country Country \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BECHTEL, STEVEN R Street Address (P.O. Box Number is Not Acceptable) 225 E. ROBINSON STREET SUITE 600 ORLANDO FL 32801 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2004 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. MGRM TITLE ☐ Delete TITLE ☐ Change Addition NAME BFT CAPITAL CORP. NAME U000000021146 STREET ADDRESS 225 E. ROBINSON STREET STREET ADDRESS 01/29/04-80096-008 50.00 CITY-ST-ZIP ORLANDO FL 32801 City-St-ZIP Delete TIME TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-\$1-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

as Director, BFT Capital Corp.

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