2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L99000005791

1. Entity Name B & V MARTIN, L.L.C.

FILED
Jan 11, 2007 08:00 AN
Secretary of State

Principal Place of Business 27 MAGNOLIA STREET FLAGLER BEACH, FL 32136 Mailing Address 27 MAGNOLIA STREET FLAGLER BEACH, FL 32136

DO NOT WRITE IN THIS SPACE

01082007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 91-2025956 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MARTIN, VICKY L 27 MAGNOLIA STREET FLAGLER BEACH, FL 32136

DO NOT WRITE IN THIS SPACE

			2.00 017102	···
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, types or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)	DATE DATE	
Filing Fee is \$50.00 Due by May 1, 2007				
9.	MANAGING MEMBERS/MANAGERS		· Harring	
TITLE NAME STREET ADDRESS GITY-ST-ZIP	MGRM MARTIN, BARRY D 27 MAGNOLIA STREET FLAGLER BEACH, FL 32136		Hogoporint radi	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MARTIN, VICKY L 27 MAGNOLIA STREET FLAGLER BEACH, FL 32136		U00000581722 01/11/07-80003-00	8 SD.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZEP		IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-78P				

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/8/2007 386-437-7700

Daytme Phone #