

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000000656

Entity Name: BP TOWNHOMES, L.L.C.

FILED
Mar 11, 2009
Secretary of State

Current Principal Place of Business:

3190 N.E. EXPRESSWAY STE 400
ATLANTA, GA 30341

New Principal Place of Business:

3190 NORTHEAST EXPRESSWAY
SUITE 400
ATLANTA, GA 30341

Current Mailing Address:

3190 N.E. EXPRESSWAY STE 400
ATLANTA, GA 30341

New Mailing Address:

3190 NORTHEAST EXPRESSWAY
SUITE 400
ATLANTA, GA 30341

FEI Number: 58-2602165

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 () Delete
Name: BERMAN, DAVID
Address: 3190 NE EXPRESSWAY STE 400
City-St-Zip: ATLANTA, GA 30341

Title: PS () Delete
Name: TRAVIS, ALAN J
Address: 3190 N.E EXPRESSWAY STE 400
City-St-Zip: ATLANTA, GA 30341

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BERKMAN, DAVID
Address: 3190 NE EXPRESSWAY STE 400
City-St-Zip: ATLANTA, GA 30341

Title: () Change () Addition
Name:
Address:
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: DAVID BERKMAN

MGR

03/11/2009

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