2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # M04000001749

1. Entity Name
PBMP ASSET MANAGEMENT, L.L.C.

Principal Place of Business	Mailing Address
5601 EDMOND, SUITE M WACO, TX 76710	5601 EDMOND, SUITE M WACO, TX 76710

DO NOT WRITE IN THIS SPACE

05032005 No Chg-LLC   CR2E083 (10/03)

4. FEI Number	Applied For
11-3713822	Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

BELLI, PHILLIP
2450 ESTERO BLVD.
FORT MYERS, FL 33931

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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)   DATE

U00000364297
05/06/05-80033-018 50.00

Filing Fee is $50.00
Due by September 7, 2005

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	POWER, MICHAEL M
STREET ADDRESS	5601 EDMOND, SUITE M
CITY-ST-ZIP	WACO, TX 76710
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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.

SIGNATURE: _Michael Power MGRM_   _5/2/05_   _254-772-6031_
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #