

**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Feb 05, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # M05000003134**

1. Entity Name  
**B & B FLORIDA PROPERTIES, LLC**



Principal Place of Business <b>3820 STADIUM DRIVE          KALAMAZOO, MI 49008</b>	Mailing Address <b>3820 STADIUM DRIVE          KALAMAZOO, MI 49008</b>
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**DO NOT WRITE IN THIS SPACE**



02012007No Chg-LLC CR2E083 (11/05)

4. FEI Number <b>20-2197388</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**BUSINESS FILINGS INCORPORATED  
 1203 GOVERNORS SQUARE BLVD, SUITE 101  
 TALLAHASSEE, FL 32301-2960**

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00 Due by May 1, 2007**


000000620976  
 02/09/07-80059-007 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WRIGHT, WILLIAM 3820 STADIUM DRIVE KALAMAZOO, MI 49008
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GRIFFEN, WILLIAM 3820 STADIUM DRIVE KALAMAZOO, MI 49008
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BROEKHUIZEN, BARRY 3820 STADIUM DRIVE KALAMAZOO, MI 49008
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SEELYR, MICHAEL N 3820 STADIUM DR KALAMAZOO, MI 49008
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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 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:**  **2/1/07**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #