

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 04, 2008 08:00 AM
Secretary of State

DOCUMENT # M05000006667

1. Entity Name
 BF PROPERTIES, LLC



Principal Place of Business
 5815 AMY'S WAY
 HARBOR SPRINGS, MI 49740

Mailing Address
 5815 AMY'S WAY
 HARBOR SPRINGS, MI 49740



01162008No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 05-0533754	Applied For Not Applicable
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5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HART, STEVE
 850 NW 17TH AVENUE
 DELRAY BEACH, FL 33445

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

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MCCARTY, DONALD WAYNE TRUSTEE 5815 AMY'S WAY HARBOR SPRINGS, MI 49740
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MCCARTY, ROBIN JEAN TRUSTEE 5815 AMY'S WAY HARBOR SPRINGS, MI 49740
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 02/12/08-80073-008 138.75

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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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: [Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/28/08
 Date

231 439 0972
 Daytime Phone #