

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 05, 2007 08:00 A
Secretary of State

DOCUMENT # M98000001625

1. Entity Name
BDC LAND INVESTMENTS, L.L.C.



Principal Place of Business
320 ELONIE ST
THOMASVILLE, AL 36784

Mailing Address
320 ELONIE ST
THOMASVILLE, AL 36784



03272007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
62-1223319

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

9. MANAGING MEMBERS/MANAGERS

TITLE PD
NAME BISHOP, JAMES B
STREET ADDRESS 320 ELONIE ST
CITY-ST-ZIP THOMASVILLE, AL 36784

TITLE VTD
NAME BISHOP, MARION O
STREET ADDRESS 320 ELONIE ST
CITY-ST-ZIP THOMASVILLE, AL 36784

TITLE SD
NAME BISHOP, JR, JAMES B
STREET ADDRESS 320 ELONIE ST
CITY-ST-ZIP THOMASVILLE, AL 36784

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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: *James Bobb Bishop*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

James Bobb Bishop

4-3-07 334-636-4369