

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000032295

FILED
Apr 24, 2004
Secretary of State

Entity Name: BAHAMU PROPERTIES, L.L.C.

Current Principal Place of Business:

2308 CHARLES COURT
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

2308 CHARLES COURT
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUSTIAN, MARK
1500 MAHAN DRIVE, SUITE 200
TALLAHASSEE, FL 32308 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/MEMBERS:

Title: MGR () Delete
Name: MUSTIAN FARMS, L.L.C., .
Address: 2308 CHARLES COURT
City-St-Zip: TALLAHASSEE, FL 32303

Title: MGRM () Delete
Name: SOSALLA SALLEW, L.L., .C.
Address: 2119 JENNETTE STREET
City-St-Zip: TALLAHASSEE, FL 32308

Title: MGRM () Delete
Name: MIDTOWN CAPITAL, L.L., .C
Address: 997 ILEX WAY
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MUSTIAN FARM, L.L.C.,
Address: 2308 CHARLES COURT
City-St-Zip: TALLAHASSEE, FL 32303

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARK T. MUSTIAN

MGRM

04/24/2004

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