2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

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DOCUMENT # 1:04000046448

1. Entity Name

QUAY DOCK ROAD PROPERTIES, L.L.C.



Principal Place of Business

3545 OCEAN DRIVE, SHIFE 201 VERO BEACH, FL 32963

3111 Cardinal Drive

Mailing Address Michael o'Haire

3545 OCEAN DRIVE, SUITE 201 VERO BEACH, FL 32963

3111 Cardenal Drive

FILED Feb 23, 2007 8:00 am Secretary of State

02-23-2007 90208 025 ****50.00

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01042007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1370358

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LLOYD, ROBIN A SR.ESQ: 3545 OCEAN DRIVE, SUITE 201 VERO BEACH, FL- 32963

Michael O'Haire 3111 Cardinal Drive Vero Beach FL 32963

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	pove named entity submits this statement for the purpose of challingations of egiste ed agent	anging its registered office or registered agent, or	both, in the State of Florida. I am familiar with, and accept
JIGNATO	Signature, typed or drinted name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE
	Filing Fee is \$50.00 Due by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGR		
114 L MT	MOSS CEORCE		

MOSS, GEORGE STREET ADDRESS 2350 QUAY DOCK ROAD CITY-ST-ZIP VERO BEACH, FL 32967 TITLE MOSS, JOYCE NAME STREET ADDRESS 2350 QUAY DOCK ROAD CITY-ST-ZIP VERO BEACH, FL 32967 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #