


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Mar 06, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # L06000034823  
 1. Entity Name  
 BAY BEACH DOCKS, LLC



Principal Place of Business 6704 LONE OAK BLVD. NAPLES, FL 34109	Mailing Address 6704 LONE OAK BLVD. NAPLES, FL 34109
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**DO NOT WRITE IN THIS SPACE**



02292008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-8436926	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

STERLING, JOHN J  
 6704 LONE OAK BLVD.  
 NAPLES, FL 34109

**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 \_\_\_\_\_

**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 CLAUSSEN, ROBERT G 6704 LONE OAK BLVD. NAPLES, FL 34109
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM CLAUSSEN, CHRISTOPHER G 6704 LONE OAK BLVD. NAPLES, FL 34109
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U00000849045  
 03/21/08-80004-025 138.75

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

SIGNATURE: Robert G. Claussen Robert G. CLAUSSEN 2/29/08 239-596-9067

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #