

**2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000114354

**FILED  
Jul 23, 2010  
Secretary of State**

**Entity Name:** BAY AREA MEDIATIONS, LLC.

**Current Principal Place of Business:**

15310 AMBERLY DR., #250  
TAMPA, FL 33647

**New Principal Place of Business:**

**Current Mailing Address:**

15310 AMBERLY DR., #250  
TAMPA, FL 33647

**New Mailing Address:**

**FEI Number:** 26-4010669      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ESCODIE, MARY  
15310 AMBERLY DR., #250  
TAMPA, FL 33647      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/MANAGERS:**

**Title:** MGR  
**Name:** ESCUDIE, MARY  
**Address:** 4724 BUTLER NATIONAL DR.  
**City-St-Zip:** WESLEL CHAPEL, FL 33543

I hereby 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: MARY M. ESCUDIE      MS.      07/23/2010

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