

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000038567

Entity Name: THE PORT OF BAY FAMILY, LLC

Current Principal Place of Business:

4517 TROPICAIRE BLVD
NORTH PORT, FL 34286

Current Mailing Address:

4517 TROPICAIRE BLVD
NORTH PORT, FL 34286 US

FEI Number: 26-4722427

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

THE HOGAN LAW FIRM
20 SOUTH BROAD STREET
BROOKSVILLE, FL 34601 US

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

Authorized Person(s) Detail :

Title MGR
Name GORDON, REPPARD
Address 4517 TROPICAIRE BLVD
City-State-Zip: NORTH PORT FL 34286

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: REPPARD GORDON

MMGR

02/14/2014

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date