

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2005 8:00 am
Secretary of State

04-26-2005 90016 033 ****50.00

DOCUMENT # L00000008634

1. Entity Name
BAHAMA BREEZE YACHT CLUB, LC



Principal Place of Business
**1339 BEVILLE ROAD
DAYTONA BEACH, FL 32119**

Mailing Address
**1339 BEVILLE ROAD
DAYTONA BEACH, FL 32119**

2. Principal Place of Business
823 Dunlawton AV
Suite, Apt. #, etc.

3. Mailing Address
823 Dunlawton Av
Suite, Apt. #, etc.

Suite A
City & State
Port Orange FL

Suite A
City & State
Port Orange FL

04112005 Chg-LLC CR2E083 (10/03)

4. FEI Number
59-3660103

Applied For
Not Applicable

Zip Country
32127 Volusia

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32127 Volusia

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

**WALKER, BERRY J
1053 MAITLAND CENTER COMMONS BLVD., #200
MAITLAND, FL 32751**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed 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, 2005**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS / MANAGERS

TITLE NAME ☐ Delete
**MGR
MCGRATH, TIMOTHY**
STREET ADDRESS **1339 BEVILLE ROAD**
CITY - ST - ZIP **DAYTONA BEACH, FL 32119**

TITLE NAME ☐ Delete
STREET ADDRESS
CITY - ST - ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
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TITLE NAME ☐ Delete
STREET ADDRESS
CITY - ST - ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY - ST - ZIP

10. ADDITIONS / CHANGES

TITLE NAME ☒ Change ☐ Addition
STREET ADDRESS **823 Dunlawton Av Suite A**
CITY - ST - ZIP **Port Orange FL 32127**

TITLE NAME ☐ Change ☒ Addition
STREET ADDRESS **MANAGING MEMBER**
CITY - ST - ZIP **EDMOND R. RANCOUET**
823 Dunlawton Ave, Suite A
PORT ORANGE, FL 32127

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY - ST - ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY - ST - ZIP

TITLE NAME ☐ Change ☐ Addition
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TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY - ST - ZIP

11. I hereby certify that the information supplied with this filing does not qualify 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 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:

Ed Rancouet

4/20/05

386-795-0912

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #