

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000008634

FILED
May 31, 2006
Secretary of State

Entity Name: BAHAMA BREEZE YACHT CLUB, LC

Current Principal Place of Business:

823 DUNLAWTON AVE, STE A
PORT ORANGE, FL 32127

New Principal Place of Business:

Current Mailing Address:

823 DUNLAWTON AVE, STE A
PORT ORANGE, FL 32127

New Mailing Address:

FEI Number: 59-3660103 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

LOGUIDICE, JOE
1515 RIDGEWOOD AVE STE A
HOLLY HILL, FL 32117 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: JOE LOGUIDICE

05/31/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MCGRATH, TIMOTHY
Address: 823 DUNLAWTON AVE, STE A
City-St-Zip: PORT ORANGE, FL 32127

Title: MGRM () Delete
Name: RANCOURT, EDMOND K
Address: 823 DUNLAWTON AVE, STE A
City-St-Zip: PORT ORANGE, FL 32127

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: EDMOND RANCOURT

MRG

05/31/2006

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