2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L0100000528 1. Entity Name BEAR BAY LEASING COMPANY, LLC

FILED Jan 18, 2005 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

5772 TIMUQUANA ROAD JACKSONVILLE, FL 32210 5772 TIMUQUANA ROAD JACKSONVILLE, FL 32210



01112005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 59-3692052

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent			and the control of th
5772 TIMU JACKSON	MATTHEW E IQUANA ROAD VILLE, FL 32210	IN TE	OT WRITE IIS 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
Filing Fee is \$50.00 Due by May 1, 2005			
9.	MANAGING MEMBERS/MANAGERS		
TILE	MGRM KENYON, MATTHEW E		
NAME STREET ADDRESS	5772 TIMUQUANA ROAD		
CITY-ST-ZIP	JACKSONVILLE, FL 32210	The state of the s	
TITLE		The state of the s	
NAME		The state of the s	= 100000019427F
STREET ADDRESS			5400000184279 51720705-80024-015 30.00
CITY · ST - ZIP			
TITLE		A Company of the Comp	
NAME Street address			
CITY ST-ZIP		DON	IOT WRITE
TITLE		IN TL	IIS SPACE
NAME		A Company of the Comp	
STREET ADDRESS			
CITY-ST-ZIP			n er til meddet medde til skiptene i store til skipte skipte som et skipte skipte skipte skipte skipte skipte Meddet skipte skipt
TITLE NAME			
STREET ADDRESS		and the second s	
CITY-ST-ZIP		And the second s	
TITLE		The state of the s	
NAME		The second se	ere riger earlier, regermannen er
STREET ADDRESS			
CITY ST-ZIP			Chat do I forther part! that the information
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: MATTHEW E. KENYON 1/12/05 (904) 777-0833