

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000005240

FILED  
Jun 03, 2009  
Secretary of State

Entity Name: BAY HARBOUR DEVELOPMENT L.L.C.

**Current Principal Place of Business:**

101 GULFVIEW DR.  
ISLAMORADA, FL 33036

**New Principal Place of Business:**

**Current Mailing Address:**

ALHAMBRA TOWERS, 121 ALHAMBRA PLAZA  
FLOOR 10  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number: 65-1124568      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:**

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

ROGEL, DAVID H ESQ.  
ALHAMBRA TOWERS, 121 ALAMBRA PLAZA  
FLOOR 10  
CORAL GABLES, FL 33134 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: WATTS, MARTIN  
Address: 1415 20 STREET, UNIT 103  
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM ( ) Delete  
Name: MIRMELLI, DEIRDRE  
Address: 1415 20 ST, UNIT 103  
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGR ( ) Delete  
Name: MIRMELLI, SEAN  
Address: 1415 20 ST, UNIT 103  
City-St-Zip: MIAMI BEACH, FL 33139

**ADDITIONS/CHANGES:**

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

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 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: DEIRDRE MIRMELLI

MS

06/03/2009

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