

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90029 043 ****55.00

DOCUMENT # L01000010171

1. Entity Name
BAY4 CAPITAL PARTNERS, LLC



Principal Place of Business
101 PHILLIPPE PKWY
STE 300
SAFETY HARBOR, FL 34695

Mailing Address
101 PHILLIPPE PKWY
STE 300
SAFETY HARBOR, FL 34695

24046400



2. Principal Place of Business
311 N Bayshore Drive
Suite, Apt. #, etc.

3. Mailing Address
311 N Bayshore Dr.
Suite, Apt. #, etc.

01062004 Chg-LLC CR2E083 (10/03)

City & State
Safety Harbor, FL
Zip 34695 Country us

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Safety Harbor, FL
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4. FEI Number
59-3727226
Applied For
Not Applicable
5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BIDINGER, CLAY M
101 PHILLIPPE PKWY STE 300
SAFETY HARBOR, FL 34695

7. Name and Address of New Registered Agent

Name
Florida Corporate Counsel, LLC
Street Address (P.O. Box Number is Not Acceptable)
101 Philippe Pkwy, Suite 301
City Safety Harbor FL Zip Code 34695

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]*
Signature typed or printed name of registered agent and title if applicable.

President/Manager
(NOTE: Registered Agent signature required when reinstating)

DATE 1/9/04

Filing Fee is \$50.00 + \$5 = \$55.00
Due by May 1, 2004

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	MGRM			
	BIDINGER, CLAY M	101 PHILLIPPE PKWY	SAFETY HARBOR, FL 34695	

10. ADDITIONS/CHANGES

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	MGRM & President				
	Bidinger, Clay M	311 N Bayshore Drive	Safety Harbor, FL 34695		
	Secretary				
	Sullivan, Christopher R	101 Philippe Pkwy, Suite 301	Safety Harbor, FL 34695		
	Treasurer				
	Gonzalez, Ramon III	311 N Bayshore Drive	Safety Harbor, FL 34695		

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:

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

Mgrm/Pres

1/9/04

(727) 216-4000