


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 04, 2005 08:00 AM
Secretary of State

DOCUMENT # L01000018236 1. Entity Name SOUTH BAY MORTGAGE COMPANY, LLC	
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Principal Place of Business 2135 ANASTASIA WAY S ST PETERSBURG, FL 33701	Mailing Address 2135 ANASTASIA WAY S ST PETERSBURG, FL 33701
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03252005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 26-0054447	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent COX, TROY M 2135 ANASTASIA WAY SOUTH ST. PETERSBURG, FL 33701	DO NOT WRITE IN THIS SPACE
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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 file if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM COX, TROY M 2135 ANASTASIA WAY SOUTH SAINT PETERSBURG, FL 33712
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<p>000000288194 04/04/05-80096-024 50.00</p> <p>DO NOT WRITE IN THIS SPACE</p>

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: Troy M Cox, V.P. **4/1/05** **727 278 6655**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date City/State Phone #