2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000003524

1. Entity Name
BAY BEACH VII. LLC



FILED Feb 26, 2007 08:00 AM Secretary of State

Principal Place of Business

4184 BAY BEACH LANE FORT MYERS, FL 33931 Mailing Address

6704 LONE OAK BLVD. NAPLES, FL 34109 US



02152007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number Applied For Not Applied For Not Applicable

-5. Certificate of Status Desired Status Desired Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

STERLING, JOHN 6704 LONE OAK BLVD. NAPLES, FL 34109

SIGNATURE:

SIGNATURE AND TYPED OR

DO NOT WRITE IN THIS 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_ | Signature, typed or printed name of registered agent and title if applicable | (NOTE Registered Agent signature required when reinstaling) | DATE |
| Filing Fee is \$50.00 Due by May 1, 2007 | | | |
| 9. | MANAGING MEMBERS/MANAGERS | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR CLAUSSON, ROBERT G 6704 LONE OAK BLVD NAPLES, FL 34109 | | U00000646544 03/06/07-80037-004 50.00 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR CLAUSSON, CHRIS G 6704 LONE OAK BLVD NAPLES, FL 34109 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | DO | NOT WRITE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | IN | THIS SPACE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | |
| TITLE NAME SIREET ADDRESS CITY-S1-ZIP | | | |
| 11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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. | | | |

YTEO NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE