FILED
May 09, 2005 08:00 AM
Secretary of State

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000009981

1. Entity Name
BAM OF BAYTOWNE WHARF, LLC

Principal Place of Business	Mailing Address
4651 SOUTHWINDS III DR. DESTIN, FL 32550	4651 SOUTHWINDS III DR. DESTIN, FL 32550

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04262005 No Chg-LLC CR2E083 (10/03)

4. FEI Number
03-0463187

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

PERSON, BRETT THOMAS
4651 SOUTHWINDS III DR.
DESTIN, FL 32550

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when executed.)

Filing Fee is $50.00
Due by May 1, 2005

000000365105
05/09/05-80026-004 50.00

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	PERSON, BRETT THOMAS
STREET ADDRESS	4651 SOUTHWINDS III DR.
CITY-ST-ZIP	DESTIN, FL 32550
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____ 4/27/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #