

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 15, 2006 08:00 A.
Secretary of State

DOCUMENT # L02000009981

1. Entity Name

BAM OF BAYTOWNE WHARF, LLC



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

Mailing Address
4651 SOUTHWINDS III DR.
DESTIN, FL 32550



03212006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

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

**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 reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

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

TITLE	
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CITY-ST-ZIP	

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05/20/06-80137-013 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing 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.

SIGNATURE: *Brett Thomas*

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

5-1-06

Date

Daytime Phone #