LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED Apr 18, 2003 8:00 am Secretary of State

DOCUMENT #L02000010064					04-18-2003 90081 022 ****50.00			
-	Bay to Bay, LLC	L						
	na var værte	IN THE O						
DO NOT WRITE IN THIS SPACE					<u>.</u>			
2. Principal P	Place of Business	3. Mailing Address			,			
Suite, Apt. #, etc. 4808 W. Woodmere Rd Suite, Apt. #, etc. 4808 W. Woodmere Rd			nere Rd		, DO NOT WRITE I	N THIS S	PACE	
City & Stat	ie :	City & State Tampa, Florida			4. FEI Number 26-6231198		_	Applied For Not Applicable
Zip 33609-	Country	Zip -33609	Country USA	ج د	_5Certificate of Status Desired <			Additional
	=		Name		7. Name and Address of Current Re			
	DO NOT WE	RITE	John Ayers Street Address (P.O. Box Number is Not Acceptable)					
	IN THIS SPA	ACE			odmere Rd.			<u>.</u>
			City To		lodmere Rd.	FL	Zip Co 336	ode
8. The above	named entity submits this statement for t	he purpose of changing its	200000000001		ed agent, or both, in the State of Florid		1 336	09
SIGNATURE .	At Lylla	-				1/1/20	003	_
	Signature, typed or panied name of registered agent and	d title if applicable.	FREIS Saf OG			DATE		
	, ,	Make CM-: : "	n to elic Corport IUII III INVIVI	eard p	Sg a			
9. TITLE	MANAGING MEMBER	S/MANAGERS	BAL					
NAME STREET ADDRESS CITY-ST-ZIP	Managing Member John Ayers 4808 W. Woodmere Rd. Tai	mpa, Fl 33606	NAME STREET ANDRESS CRIY-57-2P					
TITLÉ	<u>. </u>		TITLE					
name Street Address			NAME STREET ADORESS					
CITY-ST-ZIP			CTF-SI-DP					
NAME			NAME					
STREET ADDRESS ĈITY - ST - ZIP			STREET ADDRESS CITY-ST-ZIP		DO NOT W	R	Ē	
title Name		•	TITLE HAME		IN THIS SI	PAC	E	
STREET ADDRESS CITY - ST - ZIP			STREET ADORESS. CITY-SI-ZIP					
TITLE		······································	· THE					
NAME Street address			name Street address					
CITY+ST-ZIP TITLE	· · · · · · · · · · · · · · · · · · ·	·····	CITY-ST-ZP Bile					
NAME STREET ADDRESS			HAME STREET ADDRESS					
CITY - ST - ZIP			CITY-ST-ZP					
11. I hereby of indicated limited lies	certify that the information supplied with the on this report is true and accurate and the billity company or the receiver or trusteers.	nis filing does not qualify for at my signature shall have ampowered to execute this	the exemption stat the same legal effection as required by	ed in Sec et as if m ev Chart	ction 119.07(3)(i), Florida Statutes, I fur ade under oath; that I am a managing er 608, Florida Statutes	ther certif member	y that the or mana	e information ger of the
myster lie		NI/I/A	. epon as required t	,, onapt				