2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 20, 2007
Secretary of State

DOCUMENT# L02000012819

Entity Name: PURITY BAY, LLC

Current Principal Place of Business:

6051 MEDICI CT.
SUITE #204
SARASOTA, FL 34243

New Principal Place of Business:

831 QUEEN PALM LN
SARASOTA, FL 34243

Current Mailing Address:

4120 RIO BRAVO
SUITE #400
EL PASO, TX 79902

New Mailing Address:

831 QUEEN PALM LN
SARASOTA, FL 34243

FEI Number: 35-2169409 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CHAVEZ, JAIME
6051 MEDICI CT.
SUITE #204
SARASOTA, FL 34243 US

Name and Address of New Registered Agent:

CHAVEZ, JAIME
831 QUEEN PALM LN
SARASOTA, FL 34243 US

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.

SIGNATURE: JAIME CHAVEZ 06/20/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: HENLEY, RICHARD M
Address: 4120 RIO BRAVO , SUITE 400
City-St-Zip: EL PASO, TX 79902

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM ( ) Change (X) Addition
Name: CHAVEZ, JAIME
Address: 831 QUEEN PALM LN
City-St-Zip: SARASOTA, FL 34243

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JAIME CHAVEZ MGRM 06/20/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date