

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 07, 2005 8:00 am
Secretary of State

02-07-2005 90281 007 ****50.00

DOCUMENT # L02000015802	
1. Entity Name BAYSHORE PROPERTY ONE, LLC	



Principal Place of Business P.O. BOX 268 TERRA CEIA, FL 34250	Mailing Address P.O. BOX 268 TERRA CEIA, FL 34250
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20008048

2. Principal Place of Business 450 Bayshore Dr. Terra Ceia Isl. Florida 34250	3. Mailing Address P.O. Box 268 Terra Ceia Isl. Florida 34250
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01232005 Chg-LLC CR2E083 (10/03)

4. FEI Number 54-2065656	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent CHAPINS, MARK 450 BAYSHORE DR. TERRA CEIA, FL 34250	7. Name and Address of New Registered Agent Name: MARK CHAPIN Street Address: 450 Bayshore Dr. City: Terra Ceia Isl. FL 34250
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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	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE
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Filing Fee is \$50.00 Due by May 1, 2005	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR CHAPIN, MARK P.O. BOX 268 TERRA CEIA, FL 34250 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: MARK CHAPIN	Date: 1.31.05	Daytime Phone #: 841-713-4724
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