

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000026185

**FILED**  
**Feb 13, 2012**  
**Secretary of State**

**Entity Name:** BAY TREE OF VOLUSIA COUNTY, LLC

**Current Principal Place of Business:**

4867 SAILFISH DR.  
PONCE INLET, FL 32127

**New Principal Place of Business:**

**Current Mailing Address:**

4867 SAILFISH DR.  
PONCE INLET, FL 32127

**New Mailing Address:**

**FEI Number:** 11-3659546      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LAVELLE, ROBERT L  
4867 SAILFISH DRIVE  
PONCE INLET, FL 32127      US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** LAVELLE, ROBERT L  
**Address:** 4867 SAILFISH DRIVE  
**City-St-Zip:** PONCE INLET, FL 32127

**Title:** MGR  
**Name:** MORRIS, JAMES  
**Address:** 4876 S. PENINSULA DRIVE  
**City-St-Zip:** PONCE INLET, FL 32127

**Title:** MGR  
**Name:** HALEY, PETER  
**Address:** 4993 S. PENINSULA DRIVE  
**City-St-Zip:** PONCE INLET, FL 32127

**Title:** MGR  
**Name:** CUNNINGHAM, JAMES  
**Address:** 4923 SAILFISH DRIVE  
**City-St-Zip:** PONCE INLET, FL 32127

**Title:** MGR  
**Name:** HINTON, JOHN  
**Address:** 4504 S PENINSULA DRIVE  
**City-St-Zip:** PONCE INLET, FL 32127

**Title:** MGR  
**Name:** HORSTMAYER, DOUGLAS  
**Address:** 115 N. LAUREL AVE  
**City-St-Zip:** SANFORD, FL 32771

I hereby 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:** ROBERT L LAVELLE

MGRM

02/13/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date