2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000029035

1. Entity Name
BAY TRANSPORTATION LLC

Principal Place of Business
ONE STEINBRENNER DR.
TAMPA, FL 33614 US

Mailing Address
ONE STEINBRENNER DR.
TAMPA, FL 33614 US

01032005 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
13-4227427

Applied For / Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

TATE, MARK T
212 S MAGNOLIA AVE
TAMPA, FL 33606

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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 ______

Filing Fee is $50.00
Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	D
NAME	SWINDAL, STEPHEN W
STREET ADDRESS	ONE STEINBRENNER DRIVE
CITY ST ZIP	TAMPA, FL 33614
TITLE	D
NAME	STEINBRENNER, HAROLD Z
STREET ADDRESS	ONE STEINBRENNER DRIVE
CITY ST ZIP	TAMPA, FL 33614
TITLE	D
NAME	SWINDAL, JENNIFER S
STREET ADDRESS	ONE STEINBRENNER DRIVE
CITY ST ZIP	TAMPA, FL 33614
TITLE	D
NAME	STEINBRENNER, JESSICA J
STREET ADDRESS	ONE STEINBRENNER DRIVE
CITY ST ZIP	TAMPA, FL 33614
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

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05/04/05-80093-017 50.00

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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: [signature] 4/30/2005

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