2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

DOCUMENT # L02000033336

1. Entity Name

BAY4 FINANCIAL, LLC

FILED

06 APR 28 PM 1:43

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

1st MOORE CR2E083 (10/05)

Principal Place of Business	Mailing Address
311 N BAYSHORE DR SAFETY HARBOR FL 34695 US	311 N BAYSHORE DR SAFETY HARBOR FL 34695 US

2. Principal Place of Business	3. Mailing Address
1973 N. NELLIS	2841 COBBLESTONE DRIVE
Suite, Apt. #, etc. # 443	Suite, Apt. #, etc.
City & State LAS VEGAS, NV	City & State PALM HARBOR, FL
Zip / Country 89115 / USA	Zip / Country 34684 / USA

4. FEI Number 02-0656836 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FLORIDA CORPORATE COUNSEL, LLC 101 PHILIPPE PARKWAY SUITE 301 SAFETY HARBOR FL 34695	Name: Florida Corporate Counsel, LLC Street Address (P.O. Box Number is not Acceptable): 601 CLEVELAND ST., SUITE 501-25 City: CLEARWATER FL Zip Code: 33755

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: Address change only ! DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2006

9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRP BIDDINGER, CLAY M 311 N BAYSHORE DRIVE SAFETY HARBOR FL 34695	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRP BIDDINGER, CLAY M. 2841 COBBLESTONE DRIVE PALM HARBOR, FL 34684	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S SULLIVAN, CHRISTOPHER R 101 PHILIPPE PKWY, SUITE 301 SAFETY HARBOR FL 34695	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S SULLIVAN, CHRISTOPHER R. 601 CLEVELAND ST., SUITE 501-25 CLEARWATER, FL 33755	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T GONZALEZ, RAMON III 311 N BAYSHORE DRIVE SAFETY HARBOR FL 34695	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T GONZALEZ, RAMON III 600 S. MAGNOLIA AVENUE, STE 275 TAMPA, FL 33606	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	800074327608 05/10/06--01012--003 **400.00	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: _____ 3/23/06 813-313-5400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #