

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 29, 2003 8:00 am
Secretary of State

4/21/

04-21-2003 90408 022 ****55.00

DOCUMENT # L02000035068

1. Entity Name

BAXANN, LLC



DO NOT WRITE IN THIS SPACE

44002851

2. Principal Place of Business

389 S. Lake Drive

3. Mailing Address

same

Suite, Apt. #, etc.

4-F

Suite, Apt. #, etc.

City & State

Palm Beach FL

City & State

Zip

33480

Country

USA

Zip

Country

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☒

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Baxter Webb

Street Address (P.O. Box Number is Not Acceptable)

389 S. Lake Dr #4-F

City

Palm Beach

FL

Zip Code

33480

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

BAXTER WEBB

ANNC.WEBB

Ann C Webb

May 26, 2003

Signature typed or printed name of registered agent and user applicable.

DATE

FEES \$50.00

Make Check Payable to Florida Department of State

DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

| | |
|----------------|---------------------|
| TITLE | MGRM |
| NAME | Baxter Webb |
| STREET ADDRESS | 389 S. Lake Dr #4-F |
| CITY- ST- ZIP | Palm Beach FL 33480 |
| TITLE | MGRM |
| NAME | Ann C. Webb |
| STREET ADDRESS | 389 S. Lake Dr #4-F |
| CITY- ST- ZIP | Palm Beach FL 33480 |
| TITLE | |
| NAME | |
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**DO NOT WRITE
IN THIS SPACE**

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.

E. Baxter Webb

Ann C. Webb

SIGNATURE:

Ann C Webb + Ann C Webb

April 20, 2003

561-

833-2522

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

Date

Daytime Phone #

CR2E083B (12/02)