


4/19/20

FILED
Jul 09, 2004 8:00 am
Secretary of State

04-19-2004 90042 013 ****50.00

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L03000027639			
1. Entity Name BAYSHORE RESORT PARTNERS OF NICEVILLE, LLC			
Principal Place of Business 106 BAYSHORE DRIVE NICEVILLE, FL 32578		Mailing Address 106 BAYSHORE DRIVE NICEVILLE, FL 32578	
2. Principal Place of Business		3. Mailing Address P.O. Box 335	
State, Apt. #, etc.		State, Apt. #, etc.	
City & State		City & State Valparaiso, FL	
Zip	Country	4. FEI Number 51-0509550	Applied For (Not Applicable)
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
MOORE, JAMES E 106 BAYSHORE DRIVE NICEVILLE, FL 32578		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____		DATE _____	
Filing Fee is \$50.00 Due by May 1, 2004		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE Member NAME James E Moore STREET ADDRESS 106 Bayshore Dr. CITY-STATE-ZIP Niceville FL 32578	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE Member NAME Grady Don Pope STREET ADDRESS 106 Awater St CITY-STATE-ZIP Ft. Walton Beach, FL	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information provided with this form does not qualify for the exemption stated in Section 119.07(3)(b), 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 partner or trustee empowered to prepare this report as required by Chapter 608, Florida Statutes.			
SIGNATURE _____		DATE _____	

34009168



04142004 Chg-LLC CR2E083 (10/03)

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Due by May 1, 2004

Make check payable to
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