2007 LIMITED LIABILITY COMPANY

FILED ANNUAL REPORT Apr 23, 2007 08:00 A Secretary of State **DOCUMENT # L03000044207** 1. Entity Name **BAYOU BY THE BAY LLC** Principal Place of Business Mailing Address 818 CATTLEMAN RD. 6389 TOWER LN SARASOTA, FL 34240 SARASOTA, FL 34240 CR2E083 (11/05) 04162007 No Chq-LLC DO NOT WRITE IN THIS SPACE Applied For_ 4. FEI Number 20-0426889 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GORRELL, KELLY DO NOT WRITE 6389 TOWER LANE SARASOTA, FL 34240 IN THIS SPACE 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** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2007 ... - MANAGING MEMBERS/MANAGERS --- -9. MGRM TITLE NAME BAYOU BY THE BAY ASSOC., LLLP STREET ADDRESS 6389 TOWER LN CITY-ST-ZIP SARASOTA, FL 34240 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accorded 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 on this report as required by Chapter 608, Florida Statutes.

NAME

STREET ADDRESS

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

000000724220

05/02/07-80103-007.50,00