


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Apr 22, 2005 08:00 AM
Secretary of State**

DOCUMENT # L03000051180		
1. Entity Name BAYSIDE WELDING, LLC		
Principal Place of Business 4803 W 18TH STREET SUITE A PANAMA CITY, FL 32401	Mailing Address 4803 W 18TH STREET PANAMA CITY, FL 32401	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent SOMNITZ, GENE C 1725 STEPHENS AVENUE PANAMA CITY, FL 32401		DO NOT WRITE 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
Filing Fee is \$50.00 Due by May 1, 2005		
9. MANAGING MEMBERS/MANAGERS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SOMNITZ, GENE C 1725 STEPHENS AVENUE PANAMA CITY, FL 32401	
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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: <i>Gene Somnitz</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		



01062005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 20-0488459	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

U00000324348
04/22/05-80091-013 55.00

**DO NOT WRITE
IN THIS SPACE**

4-20-05 850 785-5312
Date Daytime Phone #