

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000019240

FILED
Apr 24, 2009
Secretary of State

Entity Name: DEERING BAY PARTNERS, LLC

Current Principal Place of Business:

8600 NW S RIVER DRIVE
STE 101
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

8600 NW S RIVER DRIVE
STE 101
MIAMI, FL 33166

New Mailing Address:

FEI Number: 20-0843064

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THORSEN, JOHN P
8600 NW S RIVER DRIVE
STE 101
MIAMI, FL, FL 33166 US

Name and Address of New Registered Agent:

THORSEN, JOHN P
8600 NW S RIVER DRIVE
STE 101
MIAMI, FL 33166 US

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.

SIGNATURE:

04/24/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: THORSEN, JOHN P
Address: 8600 NW S RIVER DRIVE STE 101
City-St-Zip: MIAMI, FL 33166

Title: MGR () Delete
Name: THORSEN, CONSTANCE P
Address: 8600 NW S RIVER DRIVE STE 101
City-St-Zip: MIAMI, FL 33166

Title: MGR () Delete
Name: BOWERS, JAMES L
Address: 13621 DEERING BAY DRIVE, #1403
City-St-Zip: CORAL GABLES, FL 33158

Title: MGRM () Delete
Name: BOWERS, DEE
Address: 13621 DEERING BAY DRIVE, #1403
City-St-Zip: CORAL GABLES, FL 33158

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JOHN P THORSEN

MGRM

04/24/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date