

**2009 LIMITED LIABILITY COMPANY REINSTATEMENT**

**FILED  
May 04, 2009  
Secretary of State**

DOCUMENT# L04000023043

**Entity Name:** TOWN HOMES OF WEST BAY COVE, LLC

**Current Principal Place of Business:**

7627 LITTLE ROAD  
NEW PORT RICHEY, FL 346540936

**New Principal Place of Business:**

36181 EAST LAKE ROAD  
SUITE 382  
PALM HARBOR, FL 34685

**Current Mailing Address:**

7627 LITTLE ROAD  
NEW PORT RICHEY, FL 346540936

**New Mailing Address:**

36181 EAST LAKE ROAD  
SUITE 382  
PALM HARBOR, FL 34685

**FEI Number:** 59-3140863      **FEI Number Applied For** ( )      **FEI Number Not Applicable** ( )      **Certificate of Status Desired** ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

BAKKALAPULO, LOUIS P.A.  
BAKKALAPULO & BOUTZOUKAS PA  
111 N BELCHER ROAD, SUITE 201  
CLEARWATER, FL 33765 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: LOUIS BAKKALAPULO, P.A.

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: COSTA HOMES, INC.  
Address: 7627 LITTLE ROAD  
City-St-Zip: NEW PORT RICHEY, FL 34654

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: PAUL BAKKALAPULO

MGRM

05/04/2009

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