## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

SIGNATURE:

## Secretary of State DOCUMENT # L04000024259 03-03-2006 90006 040 \*\*\*\*50.00 1. Entity Name BAYMARC DEVELOPMENT, LLC Principal Place of Susiness Mailing Address 1401 E. BELMONT ST. 1401 E. BELMONT ST. PENSACOLA FL 32501 PENSACOLA FJ 32501 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/05) City & State City & State 4. FEI Number Applied For 20-0961140 Not Applicable Zip Zio Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TERHAAR, ANTHONY L Street Address (P.O. Box Number is Not Acceptable) Please worrect <del>-7401</del> E. BÉLMONT ST. PENSACOLA FL 32501 1401 City 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: Typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2006 ADDITIONS/CHANGES MANAGING MEMBERS/MANAGERS 9. 10. ☐ Delete TITLE ☐ Change ☐ Addition NAME TERHAAR, ANTHONY L STREET ADDRESS 1401 E. BELMONT STREET STREET ADDRESS CITY-ST-ZIP PENSACOLA FL 32501 CITY-ST-7IP TITLE MGRM ☐ Delete TITLE ☐ Change ☐ Addition NAME SMITH, WALTER J NAME STREET ADDRESS STREET ADDRESS 25 W. CEDAR STREET, SUITE 620 CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL 32502 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P TITLE ☐ Delete TITLE □ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change TITLE TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP Delete Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 register or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

FILED

Mar 03, 2006 8:00 am

850-433-7007