

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000027829

Entity Name: ROYAL BAY HOMES, LLC

FILED
Apr 26, 2007
Secretary of State

Current Principal Place of Business:

5230-2 CLAYTON CT
FORT MYERS, FL 33907 US

New Principal Place of Business:

Current Mailing Address:

5230-2 CLAYTON CT
FORT MYERS, FL 33907 US

New Mailing Address:

FEI Number: 75-3154210

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHUMANN, RAYMOND L
27200 RIVERVIEW CENTER BLVD., SUITE 103
BONITA SPRINGS, FL 34134 US

Name and Address of New Registered Agent:

SCHUMANN, RAYMOND L
3451 BONITA BAY BOULEVARD
SUITE 200
BONITA SPRINGS, FL 34134 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:

04/26/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CAMPBELL, KEITH S MGRM
Address: 1705 COLONIAL BLVD. #C-4
City-St-Zip: FORT MYERS, FL 33907 US

Title: MGRM () Delete
Name: FREITAS, JEFF MGRM
Address: 1705 COLONIAL BLVD. #C-4
City-St-Zip: FORT MYERS, FL 33907 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CAMPBELL, KEITH S MGRM
Address: 5230-2 CLAYTON COURT
City-St-Zip: FORT MYERS, FL 33907 US

Title: MGRM (X) Change () Addition
Name: FREITAS, JEFF MGRM
Address: 5230-2 CLAYTON COURT
City-St-Zip: FORT MYERS, FL 33907 US

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: KEITH S CAMPBELL

MGRM

04/26/2007

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