## ANNUAL REPORT

## DOCUMENT # L04000033066

1. Entity Name
BAY ENGINEERING SOLUTIONS LLC



FILED Apr 20, 2007 08:00 A Secretary of State

Principal Place of Business

307 BREAM POND ROAD PANAMA CITY, FL 32409 Mailing Address

307 BREAM POND ROAD PANAMA CITY, FL 32409



04192007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

FEI Number Applied For 20-1284526 Not Applicable

X

5. Certificate of Status Desired

\$5.00 Additional Fee Required

<u>850-832-7319</u>

6. Name and Address of Current Registered Agent

STEWART, NANCY R 307 BREAM POND ROAD PANAMA CITY, FL 32409

## 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 Planery K. Sleward 41907		
Signature, typed or printeofolione of registered agent and title it applicable. (NOTF: Registered Agent signature required when reinstating) DATE		
Filing Fee is \$50.00		
Due by May 1, 2007		
9. MANAGING MEMBERS/MANAGERS		
TITLE	MGRM MANAGING MEMBERS/MANAGERS	<del></del>
NAME	STEWART, GEORGE	
STREET ADDRESS	307 BREAM POND ROAD	, ·
CITY-ST-ZIP	PANAMA CITY, FL 32409	
TITLE	MGRM	
NAME	STEWART, NANCY R	ქრებტილიტი
STREET ADDRESS	307 BREAM POND ROAD	U00000720388
CITY-ST-ZIP	PANAMA CITY, FL 32409	05/01/07-80104-002 55.0
TITLE		<del></del>
NAME		
STREET ADDRESS		DO NOT WIDITE
CITY-ST-ZIP		DO NOT WRITE
TITLE		IN THIS SPACE
NAME		IN THIS SPACE
STREET ADDRESS		
CITY-ST-ZIP		1
TITLE		
NAME [		
STREET ADDRESS		· · · · · · · · · · · · · · · · · · ·
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 eath; 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE