

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000051905

FILED
Jan 19, 2005
Secretary of State

Entity Name: NORTH BAY DEVELOPMENT COMPANY, LLC

Current Principal Place of Business:

1613 MEADOWLARK WAY
PANAMA CITY BEACH, FL 32413

New Principal Place of Business:

Current Mailing Address:

1613 MEADOWLARK WAY
PANAMA CITY BEACH, FL 32413

New Mailing Address:

FEI Number: 20-1366251

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMBROSE, JOHN C
1613 MEADOWLARK WAY
PANAMA CITY BEACH, FL 32413 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: AMBROSE, JOHN C
Address: 1613 MEADOWLARK WAY
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: MGRM () Delete
Name: RICHARDSON, LYNN
Address: 1613 MEADOWLARK WAY
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: MGRM () Delete
Name: COX, RICHARD
Address: 1613 MEADOWLARK WAY
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: MGRM () Delete
Name: ALLEN, CARL
Address: 1613 MEADOWLARK WAY
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: MGRM () Delete
Name: MCLAUGHLIN, CHRISTINE
Address: 1613 MEADOWLARK WAY
City-St-Zip: PANAMA CITY BEACH, FL 32413

Title: MGRM () Delete
Name: CARLSON, TONY
Address: 1613 MEADOWLARK WAY
City-St-Zip: PANAMA CITY BEACH, FL 32413

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
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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 for the exemption stated in Section 119.07(3)(i), 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 C. AMBROSE

MGR

01/19/2005

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