


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 10, 2008 08:00 AM
Secretary of State

DOCUMENT # L04000058155 1. Entity Name REDDBAY, LLC	
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Principal Place of Business 631 U.S. HIGHWAY ONE, SUITE 300-A NORTH PALM BEACH, FL 33408	Mailing Address 631 U.S. HIGHWAY ONE, SUITE 300-A NORTH PALM BEACH, FL 33408
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DO NOT WRITE IN THIS SPACE



01242008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-1756699	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

**REDD, MICHAEL T
631 U.S. HIGHWAY ONE, SUITE 300-A
NORTH PALM BEACH, FL 33408**

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

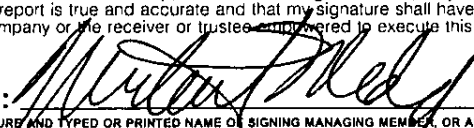
U000000890453
04/22/08-00095-000 143.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR REDD, MICHAEL T 631 U.S. HIGHWAY ONE, SUITE 300-A NORTH PALM BEACH, FL 33408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BAYNHAM, FRANK G 631 U.S. HIGHWAY ONE, SUITE 300-A NORTH PALM BEACH, FL 33408
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IN THIS SPACE**

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 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:  **4.02.08** **561-863-2500**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #