

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90049 049 ****50.00

DOCUMENT # L05000000935

1. Entity Name
BAY TREE FARM, LLC



Principal Place of Business
**655 N. FRANKLIN STREET, SUITE 2200
TAMPA, FL 33602**

Mailing Address
**655 N. FRANKLIN STREET, SUITE 2200
TAMPA, FL 33602**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04112006 Chg-LLC CR2E083 (11/05)

4. FEI Number
20-4679509

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NOLAN, MICHAEL J
201 N. FRANKLIN STREET, SUITE 2200
TAMPA, FL 33602**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
NOLAN, MICHAEL J
201 N. FRANKLIN STREET, SUITE 2200
TAMPA, FL 33602** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
CAROLYN M. WILSON
655 N. FRANKLIN ST. SUITE 2200
TAMPA FL 33602** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4-12-06

Date

813-281-8888

Daytime Phone #



ATTACHMENT
20031202
#465000000935

■ 655 North Franklin Street
Suite 2200
Tampa, Florida 33602-4448
813.281.8888
813.281.5657 Fax
www.WilsonCompany.com

April 13, 2006

Florida Department of Revenue
Division of Corporations
P.O. Box 6478
Tallahassee, FL 32314

CERTIFIED MAIL

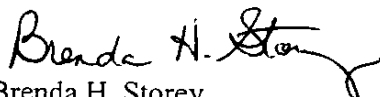
Dear Sirs:

Enclosed please find the 2006 Limited Liability Company Annual Report along with the appropriate fees for the following entities:

TWC Construction Company, LLC	FEI #20-1138903
TWC Three, LLC	FEI #20-1122509
TWC Two, LLC	FEI #20-1122536
TWC One, LLC	FEI #20-1327552
Bay Tree Farm LLC	FEI #20-4679509

Please do not hesitate to contact me if you have any questions.

Sincerely,


Brenda H. Storey
Chief Financial Officer

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