

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000000935

Entity Name: BAY TREE FARM, LLC

**FILED**  
**Mar 21, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

655 N. FRANKLIN STREET  
SUITE 2200  
TAMPA, FL 33602

**New Principal Place of Business:**

**Current Mailing Address:**

655 N. FRANKLIN STREET  
SUITE 2200  
TAMPA, FL 33602

**New Mailing Address:**

655 N. FRANKLIN STREET  
SUITE 2200  
TAMPA, FL 33602

FEI Number: 80-0192173

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

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

**Name and Address of New Registered Agent:**

WILSON, CAROLYN M  
655 N. FRANKLIN STREET  
SUITE 2200  
TAMPA, FL 33602 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: CAROLYN M. WILSON

03/21/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: WILSON, CAROLYN M  
Address: 655 N FRANKLIN ST, STE 2200  
City-St-Zip: TAMPA, FL 33602

I hereby 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: CAROLYN M. WILSON

MGRM

03/21/2011

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