2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000020697

1. Entity Name

WATSON BAYOU DEVELOPMENT, LLC



FILED Apr 08, 2008 08:00 Al Secretary of State

Principal Place of Business

P.O. BOX 850

PANAMA CITY, FL 32402-0850

Mailing Address

165 WATERFORD CT. TALLMADGE, OH 44278



01232008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-2445635

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

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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

SIGNATURE

BD8 AGENT CO.

SUITE 900

5355 TOWN CENTER ROAD

the obligations of registered agent.

BOCA RATON, FL 33486

Signature, typed or printed name of registered agent and title if applicable

6. Name and Address of Current Registered Agent

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138,75 After May 1, 2008 Fee will be \$538.75

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY+ST-ZIP	GR CALVERT, KEITH D 470 WHITE POND DR AKRON, OH 44320
TITLE NAME STREET ADDRESS CHY-ST-ZIP	GR MOSLEY, GERALD J JR 470 WHITE POND DR. AKRON, OH 44320
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GR BERENTZ, CRAIG N 470 WHITE POND DR AKRON, OH 44320
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 TYP