


# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 10, 2006 8:00 am**  
**Secretary of State**

04-10-2006 90039 049 \*\*\*\*50.00

<b>DOCUMENT # L05000040643</b>					
<b>1. Entity Name</b> BAYLEAF ENTERPRISES, LLC					
<b>Principal Place of Business</b> 2601 BAYLEAF COURT PANAMA CITY, FL 32405			<b>Mailing Address</b> 2601 BAYLEAF COURT PANAMA CITY, FL 32405		
<b>2. Principal Place of Business</b> 1018 BARRACUDA DR Suite, Apt. #, etc.		<b>3. Mailing Address</b> P.O. Box 20206 Suite, Apt. #, etc.			
City & State PANAMA CITY BEACH FL		City & State PANAMA CITY FL		<b>4. FEI Number</b> 20-2741023	
Zip 32408		Country USA		Zip 32411	
Country USA		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>			
<b>6. Name and Address of Current Registered Agent</b>  BERGMAN, KURT 2601 BAYLEAF COURT PANAMA CITY, FL 32405			<b>7. Name and Address of New Registered Agent</b> Name BERGMAN, KURT Street Address (P.O. Box Number is Not Acceptable) 1018 BARRACUDA DR City PANAMA CITY BEACH FL Zip Code 32408		
<b>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.</b> SIGNATURE <u>KURT C. BERGMAN</u> <u>6 April 2006</u> <small>Signature, typed or printed name of registered agent and date if applicable. (Typed or Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$50.00</b> <b>Due by May 1, 2006</b>		<b>Make check payable to</b> <b>Florida Department of State</b>			
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	MGRM BERGMAN, KURT 2601 BAYLEAF COURT PANAMA CITY, FL 32405	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	MGRM BERGMAN, KURT 1018 BARRACUDA DR PANAMA CITY BEACH, FL 32408	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	MGRM POYANT, BRIAN 1415 PARKWAY DRIVE PANAMA CITY, FL 32405	<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>		<input type="checkbox"/> Delete	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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<b>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.</b>					
<b>SIGNATURE:</b> <u>KURT C. BERGMAN</u> <u>6 Apr 06</u> <u>850-819-4021</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					