

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000044580

Entity Name: HULL BAY, LLC

FILED
Apr 30, 2006
Secretary of State

Current Principal Place of Business:

C/O ALBERTO A. MACIA
3033 RIVIERA DRIVE, SUITE 201
NAPLES, FL 34103

Current Mailing Address:

C/O ALBERTO A. MACIA
3033 RIVIERA DRIVE, SUITE 201
NAPLES, FL 34103

New Principal Place of Business:

C/O ALBERTO A. MACIA
3033 RIVIERA DRIVE, SUITE 201
NAPLES, FL 34103 US

New Mailing Address:

C/O ALBERTO A. MACIA
3033 RIVIERA DRIVE, SUITE 201
NAPLES, FL 34103 US

FEI Number: 59-3807389

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACIA, ALBERTO A
3033 RIVIERA DRIVE, SUITE 201
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

MACIA, ALBERTO A
3033 RIVIERA DRIVE
SUITE 201
NAPLES, FL 34103 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:

04/30/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: HAAS, CRAIG L
Address: 2981 4TH AVENUE NE
City-St-Zip: NAPLES, FL 34120 US

Title: AMGR () Change (X) Addition
Name: GOLDEN, WILLIAM J
Address: 720 FOUNTAINHEAD LANE
City-St-Zip: NAPLES, FL 34103 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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: WILLIAM J. GOLDEN

AMGR

04/30/2006

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