## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000062497

Entity Name: 515 BAY LANE, LLC

FILED Jan 24, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

104 CRANDON BLVD., SUITE 315 22 CRANDON BLV

KEY BISCAYNE, FL 33149 KEY BISCAYNE, FL 33149

**Current Mailing Address: New Mailing Address:** 

104 CRANDON BLVD., SUITE 315 P.O. BOX 490315

KEY BISCAYNE, FL 33149 KEY BISCAYNE, FL 33149

FEI Number: 20-3131233 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

OROZCO, GINETTE 527 BAY LANE

KEY BISCAYNE, FL 33149 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:

Date

ADDITIONS/CHANGES:

Electronic Signature of Registered Agent

MANAGING MEMBERS/MANAGERS:

(X) Change ( ) Addition () Delete

OROZCO, GINETTE OROZCO, GINETTE Name: Name: Address: 104 CRANDON BLVD., SUITE 315 Address: 527 BAY LANE

City-St-Zip: KEY BISCAYNE, FL 33149 City-St-Zip: KEY BISCAYNE, FL 33149

Title: MGR () Delete Title: MGR (X) Change ( ) Addition

Name: MORENO, FERNANDO Name: MORENO, FERNANDO Address: 104 CRANDON BLVD., SUITE 315 Address: 22 CRANDON BLV

City-St-Zip: KEY BISCAYNE, FL 33149 City-St-Zip: KEY BISCAYNE, FL 33149

I hereby certify that the information supplied with this filing does not qualify 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: GINETTE OROZCO 01/24/2008