2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

SIGNATURE:

PRINTED NAME OF SIGNING MANAGING

EMBER, OR AUTHORIZED

Apr 02, 2008 8:00 am Secretary of State DOCUMENT # L05000069170 04-02-2008 90149 029 ***138.75 1. Entity Name BAYI, LLC 1720 SE 16th AVE.# 1700 SE 16th Are. # 200 enniagaa 1700 S.E. 17TH STREET, SUITE 300 1700 S.E. 17TH STREET, SUITE 300 OCALA, FL 34471 OCALA, FL 34471 02082008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-3331490 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BOYD, ROY TIII DO NOT WRITE 1720 SE 16TH AVE **BLDG 200** IN THIS SPACE OCALA, FL 34471 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 8. The above named entity submits the the obligations of registered agr SIGNATURE registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 1/2008 Fee will be \$538.75 **After May** MANAGING MEMBERS/MANAGERS MGR MLE . BOYD, ROY TIII NAME .. 1720 SE 16TH AVE BLDG 200 STREET ADDRESS CITY-ST-ZIP OCALA, FL 34471 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TIT) F NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP 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 flability company or the receiver strustee empowered to execute this report as required by Chapter 608, Florida Statutes.

2-18-08

FILED